



TOGETHER WE MAKE A DIFFERENCE  
ENSEMBLE NOUS FAISONS UNE DIFFÉRENCE

# BREAST CANCER ACTION

## Volunteer Speakers Bureau Program

### Application Form

Welcome to the Breast Cancer Action Speaker's Bureau Program!

*In order for Breast Cancer Action to understand your areas of interest, and to help us ensure that you are matched with a speaking engagement that meets your comfort level, please complete the following questionnaire. (Please note, all information provided will be kept confidential).*

### Getting to Know You...

Name: \_\_\_\_\_

Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_

I am available to present during the:

*(Please check all that apply.)*

- Morning (7:30am to 12:00pm)  
 Afternoon (12:00pm to 5:00pm)  
 Evening (5:00pm to 9:00pm)  
 Weekends

I am able to present in:

- English     French  
 Other: \_\_\_\_\_

- I prefer to:
- Attend and speak on my own.
  - Attend with a co-speaker and share the podium.

- I would require:
- Assorted print materials to bring with me to distribute.
  - Videos, or other visual aids to compliment my presentation.
  - Notes, or information from BCA to reference when speaking.
  - Other: \_\_\_\_\_

- I would prefer to present at:
- Casual events with less than 20-people
  - Casual events with more than 20-people
  - Formal, corporate-based events
  - Informal, community-based events
  - As needed, regardless of the forum.

- I am:
- Interested in becoming a speaker for the Young Women's Breast Health Program.
  - Not interested in becoming a speaker for the Young Women's Breast Health Program.

What best describes your personal presentation style?

When are you available to begin?

How long have you been a member of Breast Cancer Action?

Are you available to attend a mandatory one-hour orientation session?

**Signature and Date:**

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