

Speaker Preliminary Invitation Form – Appendix 905A

Please complete and return to the Office of the Chancellor at chancery@caedm.ca or fax 780.465.3003.

About the Event

Event Title	_____	Date	_____
Description	_____		
Topic	_____		
Location	_____		
Target Audience	_____	No. People	_____
Event Planner	_____		
Contact Info	_____		
Authorized by	Immediate authority → Pastor <input type="checkbox"/> School Board <input type="checkbox"/> Other <input type="checkbox"/> (Specify) _____		
	Name: _____		
	Contact Info: _____		

About the Speaker/Group

Speaker/Group Name	_____
Resume/CV/Bio Attached	<input type="checkbox"/>
Contact Info	_____
Website	_____
Diocese of Speaker	_____
Contact Info of Diocese	_____

For Office Use Only – Suitability Form

<input type="checkbox"/> Yes <input type="checkbox"/> No _____	_____	Date	_____
<i>Nihil Obstat</i>	<input type="checkbox"/> Archbishop <input type="checkbox"/> Moderator of the Curia <input type="checkbox"/> Chancellor		

