

# WSN Request Form



Your Name: \_\_\_\_\_  
e-mail: \_\_\_\_\_  
Phone: \_\_\_\_\_

## Workplace Training Requests

I want to discuss the learning and PD needs of our office or leadership team.

I want support in setting up a PD training schedule for my company/ association I am part of.

I know a great speaker you should have in your network:

Name: \_\_\_\_\_ E Mail: \_\_\_\_\_  
Name: \_\_\_\_\_ E Mail: \_\_\_\_\_  
Name: \_\_\_\_\_ E Mail: \_\_\_\_\_

## Business Building

I want help finding speakers to inspire my clients at our company networking events.

I know an HR leader, Occupational Health/Safety Manager or CEO who could see value in your services:

Name: \_\_\_\_\_ E Mail: \_\_\_\_\_  
Name: \_\_\_\_\_ E Mail: \_\_\_\_\_  
Name: \_\_\_\_\_ E Mail: \_\_\_\_\_

I want more information about becoming a speaker in the network to share my expertise.

Thanks for sharing your thoughts!

Denise Baril, Founder  
WorkplaceSpeakerNetwork.com  
**Connect** Communicate **Collaborate**  
(403) 620-5010

Complete request and send to: [Denise@workplacespeakernetwork.com](mailto:Denise@workplacespeakernetwork.com)