

# MSPC Event Communication Form

Event Title:

Brief Description of Event (If recurring event, specify frequency)

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Event Location / Address if Necessary

## Event Details

Beginning Date:

Beginning Time:

Ending Date:

(Leave blank if same day above.)

Ending Time:

All Day Event

## Media Announcement

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## Contact and Additional Information

Submitted by \_\_\_\_\_ Email or Phone# \_\_\_\_\_

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