Goodie Bag Request Form

All requests must be turned in FOUR WEEKS before event.

Name of organization: _____

Contact name: _____

Contact Phone: _____

Contact Address: _____

City: _____ State: _____ Zip: _____

Number of Goodie Bags Needed: _____

Date Goodie Bags Needed: _____

Description of event: _____

_____

_____

Event Dates: _____

How will the event be marketed (particularly outside of Joplin)? _____

_____

_____

Event target audience: _____

_____

Contact Signature: _____

Please return completed form to:

Joplin Convention & Visitors Bureau
602 S. Main Street, Joplin, MO 64801
417.625.4789 800.657.2534
Fax 417.624.7948 www.visitjoplinmo.com