

BANGO APPEARANCE REQUEST FORM

DATE: _____

NAME/TYPE OF APPEARANCE/EVENT: _____

DATE OF APPEARANCE: _____

TIME OF EVENT _____

EVENT DESCRIPTION: _____

AUDIENCE SIZE: _____

APPEARANCE LOCATION: _____

EVENT CONTACT: _____ PHONE NUMBER: _____

E-MAIL ADDRESS _____

COMMENTS: _____

**Appearances are subject to team approval

PLEASE FAX OR MAIL FORM TO:

MILWAUKEE BUCKS

ATTN. KRIS BRUNELLI

1001 N. FOURTH STREET

MILWAUKEE WI 53203

FAX NUMBER: 414-227-0541

