



Pre-recorded

Autistic Speaker Application

/

date

Name of Person Filling out Form
if different person than speaker _____

Relationship to Speaker _____

Email _____

Phone number _____

Address _____

Information:

- Please provide a prerecorded message no more than 15 minutes in length by October 1st to lisa@spectrumtechtradeschool.com
- Subject matter is up to you as long as it is respectful and appropriate for all ages.
- By filling out this form you agree that Spectrum Tech Trade School, Village, and Training Center is not responsible for any connectivity or software issues.

length of video _____

Speaker Details

Speaker Name: _____

Phone #: _____

Business Name _____

Email: _____

Address: _____

City: _____

Zip Code: _____

Please provide typed, contact information, and if applicable, social media sites, and LOGOS, if you wish to have them displayed so attendees can contact you directly.

Please use your discretion when dealing with the public and any connections or inquiries you receive from those joining this broadcast.

Spectrum Tech Trade School, Village, and Training Center is not responsible for any interactions with the public that you come in contact with during or after this event, and you agree not to hold Spectrum Tech Trade School, Village, and Training Center responsible for any and all damages that may result from these connections, business dealings, or business leads received due to this event. In addition, you agree that Spectrum Tech Trade School, Village, and Training Center is not responsible for connectivity, internet, wifi, software, or computer issues associated with the event or any damages as a result of the above mentioned.

Signature of person or
guardian