

Show Title:

## **On-Screen Tag**

000

Show Date:	Time:	L	000
This is the lower thir during your show.	d (name/info tag for you and yo	our guest). It will app	pear on the screen
Please complete the your show host.	Tags you want to have on scree	en, and then return t	this form via email to
Tag 1: Guest Nan	me/Title/Organization		
Name			
Title			
Organization <sub>.</sub>			
Tag 2: For more i	information on your subje	ect	
Web			
Phone			
E-mail			
Tag 3: For more	information on your even	its*	
Name of Even	t		
Venue			
Date			
Time			
Contact (web	/phone)		

<sup>\*</sup>This may be made into a full page graphic at the discretion of the director.