**Rosetta Radio**

**Short Term Radio Station Enquiry**

|  |  |
| --- | --- |
| Event name |  |
| Event location |  |
| Event date(s) / time(s) |  |
| Event type |  |

|  |  |
| --- | --- |
| Organisation |  |
| Contact name |  |
| Contact role |  |
| Contact address |  |
| Contact phone |  |
| Contact email |  |

|  |
| --- |
| Services required – If you know what you need from us then please enter it here or just leave it blank if you’re not sure yet |
|  |

Please complete the details on page 2 and feel free to add any other information that may help.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| Description of event – Please include as much information as you can so that we can understand what you are doing and how we can help |
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