

FIX MY VOICE™

VOCAL HEALTH, PERFORMANCE PEDAGOGY, CREATIVE ENTREPRENEURSHIP, MUSIC BUSINESS EVENT INQUIRY & BOOKING REQUEST FORM

Celebrity Vocal Health Expert & Coach, Singer-Songwriter, Speaker, Author, Clinician, Philanthropist, & Mental Health Advocate

Ashaala Shanae

As you are aware, there are many details that go into bringing a Facilitator to a city for any event. Please complete this form as all the information you can provide initially will assist in the booking process. Please be aware that this serves as an invitation only, NOT a confirmation of appearance; it will merely assist us in making the best decision possible while doing all that we can to meet your request. Please answer the following questions and return this completed form via e-mail:

Booking Information – Attn: Kathleen Sanchez

Email: info@themahi.com / Phone:(305)330-0667

| Facilitator (s) Reque | ested: | | | | | |
|---|-------------|--------|--------------|-------|---------------------|--|
| Title of Event: | | Do | ate of Event | : | | |
| Event Inquiry (circle | one): Works | hop | Interview | Panel | Concert Performance | |
| Event Time: Facilitator's Time Slot: | | | | | | |
| Sponsor/Host of Eve | ent: | | | | | |
| Main Point of Contact: | | | | | | |
| Contact Phone (day of): () Email: | | | | | | |
| Event Venue: | | | | | | |
| Venue Street Address: | | | | | | |
| City: | | | State: | Zi | ip Code: | |
| Nature of Event: | | | | | | |
| Attire (Circle one): | Casual | Formal | Busine | ess O | ther | |
| Venue Capacity: Anticipated Attendance: | | | | | | |

| ADDITIONAL DETAILS: (Please complete the remaining requested information below.) | | | | |
|--|--|--|--|--|
| Names of other invited Guests/Facilitators/Presenters: | | | | |
| What is the anticipated program order? | | | | |
| How long would you like Ashaala to perform/present? | | | | |
| How many topics would you like Ashaala to present? | | | | |
| What is the budget for the entire event? | | | | |
| What is the allocated budget for your Guest ? | | | | |
| Is there a Registration Fee involved for the event? (Y)/(N) | | | | |
| If yes, how much are ticket prices? \$ | | | | |
| What is the promotional budget for this event? | | | | |
| What is the expected date for promotions to begin? (mm/dd) | | | | |
| How will you be marketing the Event? | | | | |

Thank you for considering the workshop facilitation of Ashaala Shanae for your event. We look forward to working with you to make this a great experience. If you have any questions or concerns, please email The Music and Arts Healing Institute (M.A.H.I.) at info@themahi.com or call (305) 330-0667.