



## Speaking Request Form

**Today's Date:**

### **Ministry Information**

Sponsor/Host of Event:

Church Name:

Pastor's Name:

Street Address:

City:

State:

Zip:

Mailing Address:

City:

State:

Zip:

Website Address:

### **Contact Person**

Name:

Office Phone:

Cell Phone:

E-Mail Address:

Fax:

### **Speaking Request**

Speaking Dates/Times:

Type of Event:

### **Venue Information: If different from the church**

Venue Name:

Street:

City:

State:



Zip:

Seating Capacity:

Expected Attendance:

Other Speakers Invited:

**Accommodations and Transportation:**

Name of Hotel:

Distance To Event:

Name of Airport:

Distance to Hotel:

**Are you a member of Pastor Joel Osteen's Network?**

**Lisa's Name Pronunciation:** Lisa's last name is pronounced Co-miss, with a long "o" sound.

**Personal Preferences:** Lisa would like bottled water at the podium and she uses a handheld microphone. Please reserve one seat near Lisa for her assistant in the services.

**Lisa's Mailing Address:**

Lisa Osteen Comes  
3700 Southwest Freeway  
Houston, TX 77027

**Lisa's Executive Assistant:**

Leslie Garcia  
[leslie@lakewood.cc](mailto:leslie@lakewood.cc)  
Office: 713-491-1123  
Cell: 832-849-7606