

# AlquanPinkard.com

## Visit/Tour Request Form

Thank you for your interest in having Author Alquan Pinkard visit and speak with your organization. Please mail completed form to:

Dr. Ayin Adams  
PO Box 195  
Wailuku HI 96793

**First Name**

required

**Last Name**

required

**Address**

required

**Address line 2**

**City**

required

**State**

required

**Phone**

required

**Fax**

**Email**

required

**Name of Group / Book Club / Organization**

required

**Requested Date of Visit**

required

**Number of Participants**

required

**Age Group**

required

**Number of Books Requested**

required

**Private or Public event?**

Public  Private

**Will There Be Other Speakers?**

Yes  No

# AlquanPinkard.com

## Visit/Tour Request Form

Please tell us why you would like Author Alquan Pinkard to speak with your group?

Comments, Questions, Special Requests