

**CREATIVE AGING FESTIVAL
EVENT SUBMISSION FORM**

ORGANIZATION: _____

WEBSITE: _____

CONTACT INFORMATION:

NAME: _____ **POSTION:** _____

E-MAIL ADDRESS: _____

PHONE NUMBER: _____

TITLE OF EVENT: _____

DATE: _____ (must be during the month of May)

TIME: _____

ADMISSION FEE: _____

LOCATION: _____

Is this location wheelchair accessible? Yes ___ No ___

EVENT DESCRIPTION: [50 words or less]

All events submitted by March 1, 2012 will be listed on the City of Bloomington Commission on Aging website: www.bloomington.in.gov. Early submissions will be given priority consideration for inclusion in a printed program guide; space limitations may not allow us to print every event. Events that do not fit the festival objective will not be included.

Please e-mail, fax or mail back to:
City of Bloomington Commission on Aging
401 N Morton Street
Bloomington, Indiana 47402
Phone: 812.349.3430 Fax: 812.249.3483
E-mail: cfrd@bloomington.in.gov