

**CALIFORNIA FEDERATION OF MINERALOGICAL SOCIETIES
PODIUM PEOPLE**

NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

FEE (including mileage): _____

EQUIPMENT NEEDED: _____

ADVANCE NOTICE TIME: _____

TRAVEL LIMITS: _____

TITLE (S) OF PROGRAM (S) WITH A SHORT DESCRIPTION:

TITLE _____ LENGTH OF TIME: _____

SOMETHING ABOUT YOURSELF: _____

Mail this form to:

Cheri George
5006 N. Bentree Circle
Long Beach, CA 90807

562-428-8240