



Charitable Appearance Request Form

Derrick Brooks Charities Inc., accepts formal requests for appearances of Derrick Brooks. If you are interested in submitting a request to be considered for your upcoming event, please provide as much of the below request information as possible that pertains to your event and/or request. Because of the high volume of requests that we receive, please allow 6 to 8 weeks advance notice of **ALL** events. If you have additional information that you would like to submit, please send the information along with this completed form to:

Derrick Brooks Charities, Inc.
Attn: Appearance Requests
10014 N. Dale Mabry Hwy., Suite 101
Tampa, FL 33618

Name of Organization Requesting Appearance: _____

Contact Person: _____

Title: _____

Address: _____

City, State, Zip: _____

Phone: _____ Cell Phone: _____

Alternate Number: _____ Fax: _____

Email Address: _____

Tax ID#: _____

Purpose of Mr. Brooks Appearance: _____

Name of the event with a brief description: _____

If applicable, who will benefit from the proceeds: _____

Date and time of the event: _____

Location of the event: _____

Will transportation and/or accommodations be provided, if so, please outline: _____

Length of time commitment needed by Mr. Brooks: _____