

# Media Request Form

Business/Organization of Character: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Date of Coverage

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
(mm/dd/yyyy) (mm/dd/yyyy)

## To Be Shared Via

- Website (www.communityofcharacter.ca)  Twitter  
 Facebook  Instagram

## Type of Coverage

- Awareness  
 Event - *Event Name:* \_\_\_\_\_  
 Other: \_\_\_\_\_

## Content

- Text: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Video(s): *links or files can be emailed to info@communityofcharacter.ca*  
 Image(s): *files can be emailed to info@communityofcharacter.ca*  
 Does your event have a hashtag? # \_\_\_\_\_

***If you have any questions or concerns  
regarding your media request form please  
email info@communityofcharacter.ca.***

