

## MEDIA REQUEST FORM

Thank you for your interest in featuring the Ann Bancroft Foundation! We are pleased to provide information, comments, and quotes regarding the Foundation, our programming or the importance of supporting girls in the pursuit of their dreams. This being said, we also respect the privacy of our alumnae. If you wish you speak to an alumna in your area, please fill out the following information. Once completed, we will review the inquiry and respond promptly. Should your request be approved, we ask that you refer to alumnae only by their first name and last initial.

First Name:			
Last Name:			
Publication:			
Job Title:			
Frequency of Publication:			
Deadline for Interview:			
Address:			
Address 2:			
City:	State:	Zip:	
Phone:	Email:		
	erience that you are hoping to l		
	al location that you would like t	o highlight?	
How do you plan to use the co	ontent of your interview?		
		ormation you provided above is acc ct and privacy for grant alumna.	urate and you
Signature		Date	
Once completed, please mail	in or email this form to:		

Sara Fenlason
Executive Director
Ann Bancroft Foundation
211 N 1st St Ste 480
Minneapolis, MN 55401
saraf@annbancroftfoundation.org
612-338-5752 ext. 190