



2009-2010 Jewish Media Information Form

☆ This form must be returned to PANIM 6 WEEKS before the seminar. Please Do Not Alter This Form ☆
Please PRINT all information clearly

Seminar Date: January 17 -19, 2010 **Sponsoring Agency:** _____

Contact Person: _____

Phone #: _____ **Email:** _____

After your seminar concludes, we will send a press release to your local Jewish newspaper and the community contact person.

Name of Local Jewish Newspaper: _____

Address of Local Jewish Newspaper: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Contact Name: _____ Email: _____

Name of Local Jewish Newspaper: _____

Address of Local Jewish Newspaper: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Contact Name: _____ Email: _____

Name of Local Jewish Newspaper: _____

Address of Local Jewish Newspaper: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Contact Name: _____ Email: _____

The PANIM Institute for Jewish Leadership and Values
2020 K St. NW, Suite 7400, Washington, DC 20006
Phone: 202-857-6633 Fax: 202-857-6568 Email: PANIM@bbyo.org Web: www.panim.org

For Office Use Only Date Received: _____ Sacramento Seminar January 17th – 19th, 2010