**NEW YORK ARCHIVES WEEK**

**EVENT SUBMISSION FORM**

**Archivists Round Table of Metropolitan New York, Inc. (ART)  
New York Archives Week 2013 – 25th Anniversary  
October 6—12, 2013**  
**DEADLINE FOR EVENT CALENDAR SUBMISSIONS: Friday, August 30, 2013, 2:00 pm  
  
QUESTIONS CONCERNING SUBMISSIONS may be sent to: secretary@nycarchivists.org**

If you are able to fill out the new ONLINE submission form, it would help us automate processes. <https://nycarchivists.wufoo.com/forms/art-new-york-archives-week-2013-submission-form/>

If you out this word doc form in lieu of online submission, submit to: [secretary@nycarchivists.org](mailto:secretary@nycarchivists.org)

Complete event details, including event date, time and location must be determined prior to submission. Please do not use this form to submit proposals for regular ART Monthly Programming events; those may be sent to programming@nycarchivists.org for future consideration.

**Information for New York Archives Week 2013 Public Calendar**

**Contact Information for ART Internal Use:**

Company/Organization/Repository:

Last Name:

First Name:

Contact Email:

Contact Daytime Phone Number:

Contact Evening Phone Number:

Company/Organization/Repository web site (if applicable):

**Calendar Information for New York Archives Week 2013 (to be published on public calendar):**

Event Title:

Event Type (Program, Exhibit, Tour, Lecture, Panel Discussion, Workshop, Other/Please Specify):

Sponsoring Company/Institution/Repository:

Sponsoring Company/Institution/Repository web site (if applicable):

Co-Sponsor Company/Institution/Repository (if applicable):

Co-Sponsor Company/Institution/Repository web site (if applicable):

Event Date:

Event Start Time:

Event End Time:

Event RSVP Email and/or Phone Number (if applicable):

Event Date/Alternate (if applicable):

Event Time/Alternate (if applicable):

*If you are flexible with date/time, let us know in comments.*

Event Location (street address, room/floor (if applicable), city, state, zip):

Event Contact Name (if applicable/for public contact):

Event Phone Number (if applicable/for public contact): ### - ### - ####

Event Web Site (if applicable):

Brief Description of Program (include RSVP details, capacity and security information, if applicable):

Additional Information/Comments:

Submit this form to: [**secretary@nycarchivists.org**](mailto:secretary@nycarchivists.org)