City of Albert Lea Government Channel Event Submission Form

When do you want your message to start displaying? (month/date/year)

When do you want your message to end? (month/date/year)

Enter your message in the space provided below. Don't forget date, time, place of your event, and who can be contacted for more information!

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Contact information for questions:
Please note: Anonymous submissions WILL NOT be accepted.

Name _____

Email: _____

Phone: _____

☐ I have read the "Terms of Use" page for rules governing submissions.

For more information please call the Public Information Coordinator's office, 507-377-4380.