



CHESTER COUNTY HISTORIC  
PRESERVATION NETWORK  
2017 FALL WORKSHOP  
SOCIAL MEDIA, CONTINUED, & NEWS  
RELEASES: TELLING THE PUBLIC YOUR STORY

**Saturday, October 21**  
**8 am– 12:30 pm**  
**East Goshen Township Building**  
**1580 Paoli Pike**  
**West Chester, PA 19380**

**AGENDA**

**Your Events and Information:**

What you are, what you do on your own and what the Township does that you can help with (the HC or HARB, other ABCs your township or borough may have.)

**Telling Your Story:**

Use News releases to “tell your story.” How to pick subject matter. The media.

**Social Media:**

Types of social media. Three kinds or major social media. Facebook, Instagram and InkedIn. Pros and Cons, samples, your municipality.

**Websites:**

Should it only be the Historical Commission’s website or part of the township’s website? What features should be included?

**SCHEDULE**

- 8:00 - 8:30am: Registration  
8:30 - 8:45am: Welcome  
8:45 - 9:15am: Review of Spring 2016 Workshop  
9:15 - 10:00am: Public Relations & News Releases  
10:00 - 10:15am: BREAK  
10:15 - 11:45am: # Major Types (Facebook, LinkedIn, and Instagram)  
Pros and Cons  
Samples  
11:45 - 12:15am: Social Media Part II  
12:15 - 12:30am: Closing

**THIS WORKSHOP**

- Will give you pros & cons of each type of social media and samples.
- Will help you tell your story to the public through the media.

**RSVP DEADLINE OCTOBER 7TH**  
**(NO REFUNDS AFTER OCTOBER 7TH)**

**CCHPN**  
**2017 FALL WORKSHOP**  
**SATURDAY, OCTOBER 21**

**Municipality/Organization** \_\_\_\_\_

**Primary Contact** \_\_\_\_\_

**Day Telephone** \_\_\_\_\_ **Email** \_\_\_\_\_

**First four Members of the Municipality can attend for \$15 per person:**

_____	Day Phone _____	Email _____	\$15
_____	Day Phone _____	Email _____	\$15
_____	Day Phone _____	Email _____	\$15
_____	Day Phone _____	Email _____	\$15

**Additional Municipal Members or Individual Members for \$20 per person:**

_____	Day Phone _____	Email _____	\$20
_____	Day Phone _____	Email _____	\$20

**Non-Members of CCHPN for \$25 per person:**

_____	Day Phone _____	Email _____	\$25
_____	Day Phone _____	Email _____	\$25

**Membership Dues:**

Municipality/Organizational (\$85) \_\_\_\_\_

Individual (\$20) \_\_\_\_\_

Total Amount Enclosed \$ \_\_\_\_\_

**RSVP BY OCTOBER 7TH**

**(NO REFUNDS AFTER OCTOBER 7TH)**

**Make checks payable to:**  
**CCHPN 2017 Fall Workshop**  
**P.O. Box 174**  
**West Chester, PA 19381**