



HEALTH FAIR/PRESENTATION REQUEST FORM

DCHHS is dedicated to creating healthy, informed and empowered communities. To request health education materials and/or a representative for an event, please submit a request by completing the form below at least a week prior to the event. We will contact you within 5 business days.

CONTACT INFORMATION

Today's date:		Organization:			
Contact name:			Phone Number:		
Email Address:			Fax Number:		
Mailing Address:					
	Street	City	State	Zip	

EVENT INFORMATION

Event Name:				Event Date:	
Start Time:		End Time:		Duration:	
Estimated Number of Participants:		Event Setup:	Indoor	Outdoor	
Requested Services:	Vendor Booth		Presentation		
	Education Materials Only		Other (Please specify)		
	STD/HIV Screening				
Event Location:					
	Street	City	State	Zip	
Additional Information (Optional) :					

RETURN FORM TO

Please return completed form to DCHHS Public Information Officer

PIO_DCHHS@dallascounty.org

You will receive an e-mail or phone call accepting or declining your invitation within 5 business days of submitting this request. If you did not receive any response, please call (214) 819-1929.