



NEW HANOVER COUNTY
HEALTH DEPARTMENT
 2029 SOUTH 17TH STREET
 WILMINGTON, NC 28401-4946
 TELEPHONE (910) 798-6500, FAX (910) 772-7805



HEALTH PROMOTION EDUCATION REQUEST FORM

Today's Date: September 25, 2014

Contact Information

Audience Information

Sponsoring Organization:	Audience Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Both
Contact Person:	Audience Age Range:
Email:	Number Attending:
Phone Number:	Alternate Phone Number:

Event Information

Equipment Available for Use At Event Location

Event Name:	<input type="checkbox"/> Computer
Event Location:	<input type="checkbox"/> Projector
Health Topics of Interest:	<input type="checkbox"/> Wireless Internet
Additional Agencies Invited:	<input type="checkbox"/> Table
Preferred Date: Click here to enter a date.	<input type="checkbox"/> Microphone
Alternate Date: Click here to enter a date.	<input type="checkbox"/> Dry Erase Board
Start Time:	End Time:
	<input type="checkbox"/> Other:

Advertising Methods

Advertised Incentives

Additional Requests

<input type="checkbox"/> Flyers/Posters
<input type="checkbox"/> Television
<input type="checkbox"/> Social Networking
<input type="checkbox"/> Magazine/Newspaper
<input type="checkbox"/> Word of Mouth
<input type="checkbox"/> Other:

<input type="checkbox"/> Foods
<input type="checkbox"/> Extra Credit
<input type="checkbox"/> CEU's
<input type="checkbox"/> Door Prizes
<input type="checkbox"/> None
<input type="checkbox"/> Other:

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