



Champaign-Urbana Public Health District Outreach Event Request

Please open and complete this form in a *desktop PDF reader*.

When complete, email this form and any attachments to Program Coordinator Karen Gehrt at kgehart@c-uphd.org. For questions, contact Karen via email or call 217-531-5356.

Organizer Name and Contact Information:

Name: _____ Title: _____

Organization: _____

Email: _____ Phone: _____

Event name: _____ Event date/time: _____

Event address/location: _____

Expected Audience Numbers:

Youth/students (ages 0–21): _____ Adults: _____

Target population(s) (check all that apply):

- | | | |
|-------------------------------------|---|--|
| <input type="checkbox"/> Low-income | <input type="checkbox"/> Lives in rural areas | <input type="checkbox"/> Disabled |
| <input type="checkbox"/> Minorities | <input type="checkbox"/> English as a Second Language (ESL) | <input type="checkbox"/> Senior citizens |
| <input type="checkbox"/> Children | <input type="checkbox"/> Refugees/immigrants | <input type="checkbox"/> Women |

Please describe the communities/neighborhoods the event will target (*i.e., schools, churches, housing, youth groups, etc.*):

Please specify any/all language(s):

Spanish French Other: _____

Requested CUPHD resources (check all that apply):

- Swag Flyers WIC/nutrition Sexual health/family planning
 Lactation Station Other: _____

Will tables and chairs be provided?

- Yes No

Will the media be present at the event (TV, radio, newspaper, etc.)?

- Yes No

If yes, please specify who: _____

Organizer's plans for marketing/promoting the event (please check all that apply):

NOTE TO ORGANIZER: Please attach any event promotional materials to this form by clicking the button to the left.

Traditional media

- Organization website TV Radio Newspaper

Social media

- Facebook Instagram YouTube TikTok

Other media: _____

Signature: _____

(NOTE: This form will not be editable once signed.)