

PLEASE RETURN 45 DAYS PRIOR TO REQUESTED DATE Date Submitted:

Email completed form to: [Koren.Norwood@camdencounty.com](mailto:Koren.Norwood@camdencounty.com)

### REQUESTING AGENCY'S INFORMATION

Name of Contact:

Title of Contact:

Agency or Organization:

Address:

Telephone #:

Fax #:

Email Address :

### EVENT INFORMATION

Name of Event:

Date Requested:

Rain / Alternate Date:

Time(s) during which the Van will be needed:

Location:

Address:

Outdoor event: [ ] Y [ ] N

Indoor event: [ ] Y [ ] N

Requesting Van: [ ] Y [ ] N

Is table Provided: [ ] Y [ ] N

**To help us prepare for this event please answer the following:**

- What is the purpose/goal of this event?
- What group(s) are being focused on at this event? (e.g. women and infants, children, teens, elderly, etc.)
- Besides English, what languages will be represented?
- How many people are expected to attend this event?
- What other agencies or organizations will be participating or are expected to attend?
- What types of outreach and/or advertising have been done in preparation for this event?
- Date by which we should confirm our participation in this event?