

**Charla de Lupus (Lupus Chat)<sup>®</sup> Program  
Presentation and Health Fair Request Form**

| <b>BACKGROUND INFORMATION ON THE EVENT</b> |   |
|--|---|
| <b>Name of Event:</b>                      |   |
| <b>Date and Time of Event:</b>             | <b>Please Mark One:</b><br><input type="checkbox"/> Presentation <input type="checkbox"/> Health Fair |
| <b>Contact Person:</b>                     |   |
| <b>Phone Number:</b>                       | <b>Fax Number:</b>  |
| <b>How did you hear about Charla?</b>      |   |

| <b>EVENT DETAILS</b>             |   |
|----------------------------------|---|
| <b>Approximate # of People:</b>  | <b>Address/Directions:</b>  |
| <b>Contact Person at Event :</b> | <b>What percentage of Spanish-speaking individuals is in the group?</b> |
| <b>Specific Areas to Cover:</b>  |   |

\*\*Fax completed forms to 212.774.2333 or email the form to [charla@hss.edu](mailto:charla@hss.edu).\*\*