



COMMUNITY OUTREACH REQUEST FORM

County of Orange / Osceola / Seminole/Other _____
(Circle One)

Agency / Business Name: _____

Agency / Business Name Point of Contact: _____

Point of Contact E-mail: _____ Phone No.: _____

Name of Event / Activity: _____

Date of Event / Activity: _____ Beginning Time: _____(am/pm) Ending Time: _____(am/pm)

Location Address of Event / Activity: _____

Type of Activity: Presentation Table Event - The Event / Activity: Inside Outside

Topic Requested for Presentation: _____

Type of Audience: _____ Audience Size (Anticipated): _____

Material Requested: Sexual Violence Only Non-Sexual Violence Both

E-mail or Fax Your Request Form to Rhonda.Wilson@VictimServiceCenter.org or (407) 228-1420

Office Use Only

Post Event / Activity Information:

Presentation

Audience Size: _____

Topic of Presentation:

- Bullying / Cyberbullying (circle)
- Bystander
- Crime & Crime Prevention
- Internet Safety
- Lunch & Learn
- Personal Safety
- Sensitivity Training
- Stalking
- Other: _____

Number of VSC Sexual Assault Brochures: _____
Number of VSC Crisis Cards: _____
Number of Sexual Battery Brochures: _____
Number of Rack Cards: _____
Other Flyers: _____

Target Audience: _____

Staff/Volunteer Assigned: _____

Table Event

Audience Size: _____

Material Distributed:

- VSC Brochures
- VSC Crisis Cards
- Rack Cards
- Sexual Battery Brochures
- Other: _____
- Promotional Items: _____

Number of VSC Sexual Assault Brochures: _____
Number of VSC Crisis Cards: _____
Number of Sexual Battery Brochures: _____
Number of Rack Cards: _____
Other Flyers: _____

Target Audience: _____

Staff/Volunteer Assigned: _____