

## Event Request

Thank you for contacting the Wellbeing Team in connection with your event. We always appreciate being invited to attend events, however we do not always have the resources to respond to all requests. Please could you answer the following questions to enable us to make a decision whether we can attend your event:

<b>Date and time</b>	
<b>Venue</b>	
<b>Name of Event Organiser</b>	
<b>Name of Event Organiser</b>	
<b>Address 1</b>	
<b>Address 2</b>	
<b>Town</b>	
<b>Postcode</b>	
<b>Telephone Number</b>	
<b>Email</b>	
<b>Please give brief outline of the activity you are planning, including what you hope to achieve from this activity? (Aims and Objectives)</b>	

**Who is the target audience – please indicate the geographical area you expect to reach and any groups you are targeting**

- |                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Devonport<br><input type="checkbox"/> Morice Town<br><input type="checkbox"/> North Prospect & Weston Mill<br><input type="checkbox"/> Honicknowle<br><input type="checkbox"/> Keyham<br><input type="checkbox"/> Barne Barton<br><input type="checkbox"/> St Budeaux/Kings Tamerton<br><input type="checkbox"/> Ernesettle<br><input type="checkbox"/> Whitleigh<br><input type="checkbox"/> Efford | <input type="checkbox"/> East End<br><input type="checkbox"/> Stonehouse<br><input type="checkbox"/> Homeless people<br><input type="checkbox"/> Gypsy / travellers communities<br><input type="checkbox"/> Ethnic minority groups<br><input type="checkbox"/> People with learning disabilities<br><input type="checkbox"/> People experiencing poor mental health<br><input type="checkbox"/> People who are long term unemployed<br><input type="checkbox"/> People with disabilities |
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**How are you publicising your events (please provide details of the range of media you are using)**

**How many people do you expect to attend?**

**Which of the following One You subjects do you wish to cover?**

- |                                                                                                                                                                              |                                                                                                                    |
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| <input type="checkbox"/> Be Smoke Free<br><input type="checkbox"/> Eat Well<br><input type="checkbox"/> Move More<br><input type="checkbox"/> Check Yourself (Health Checks) | <input type="checkbox"/> Drink Less<br><input type="checkbox"/> Stress Less<br><input type="checkbox"/> Sleep Well |
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Please return this form via email to: [oneyou.plymouth@nhs.net](mailto:oneyou.plymouth@nhs.net)