

# Workshop Request Form

Organization/School: \_\_\_\_\_ Phone \_\_\_\_\_ x \_\_\_\_\_

Contact Person \_\_\_\_\_ Job Title \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Room # \_\_\_\_\_

Do you have access to a projector for Power Point presentations? Yes No

Notes/Comments that would be helpful for us to know when preparing for your workshop: (i.e. class is majority English learners.)

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**Please note:** We provide workshops Tuesday through Friday only.

## List of Topics:

### Sexual Health

Reproductive Anatomy

Birth Control Methods

(STIs)

Barrier Methods

HYPE (HIV/AIDS)\*

*\* Please use the HYPE Request Form*

### Healthy Living

Healthy Relationships

Body Image

Alphabet Soup

Substance Use 101

Substance Use 201

SEX: Make It Right For You

Intimacy and Media Literacy

Human Trafficking

Healthy Sexuality

Puberty 101 (middle school)

Puberty 201 (high school)

**Please fill out each box per topic you want. Workshop #1**

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____ _____	<b>Times:</b> _____ _____ _____
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**Workshop #2**

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**Workshop #3**

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**Workshop #4**

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