

# Workshop Request Form

**Organization/Agency** \_\_\_\_\_ **Phone** \_\_\_\_\_ x \_\_\_\_\_

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

**Address** (please include cross street and zip code) \_\_\_\_\_

**Email** \_\_\_\_\_ **Room #** \_\_\_\_\_ **Bus Lines** \_\_\_\_\_

**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.)  
\_\_\_\_\_  
\_\_\_\_\_

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

## List of Topics:

Healthy Sexuality

Healthy Relationships

Puberty 101 (middle school)

The Mirror Image: Body Image and Eating Disorders

Puberty 201 (high school)

Alphabet Soup: Anti-Homophobia and Issues Affecting LGBTQIQ Youth

Reproductive Anatomy

Birth Control Methods and Contraception

Substance Use 101

Protect Yourself! (STIs)

Substance Use 201

HIV/AIDS (single session)

HYPE (HIV/AIDS)\*

All About Latex

*\* Please use the HYPE Request Form*

SEX: Make It Right For You

Health Education Jeopardy

**Please fill out each box per topic you want.**

### Workshop #1

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____ _____	<b>Times:</b> _____ _____ _____
---------------------------------	---	--

**Workshop #2**

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____	<b>Times:</b> _____ _____
---------------------------------	--	---------------------------------

**Workshop #3**

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____	<b>Times:</b> _____ _____
---------------------------------	--	---------------------------------

**Workshop #4**

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____	<b>Times:</b> _____ _____
---------------------------------	--	---------------------------------

**Workshop #5**

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____	<b>Times:</b> _____ _____
---------------------------------	--	---------------------------------

If you have any questions, please call Ashley Rojas, Senior Health Educator at 415.386.9398.  
Please fax completed request forms to 415.386.8212, Attn: Health Education.

**Workshop #6**

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____	<b>Times:</b> _____ _____
---------------------------------	--	---------------------------------

**Workshop #7**

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____	<b>Times:</b> _____ _____
---------------------------------	--	---------------------------------

**Workshop #8**

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____	<b>Times:</b> _____ _____
---------------------------------	--	---------------------------------

**Workshop #9**

<b>Topic:</b> _____ _____	<b>Date Choices:</b> _____ _____	<b>Times:</b> _____ _____
---------------------------------	--	---------------------------------

If you have any questions, please call Ashley Rojas, Senior Health Educator at 415.386.9398.  
Please fax completed request forms to 415.386.8212, Attn: Health Education.