

The Skalny Building 1 Mount Hope Avenue Rochester, NY 14620 www.restoresas.org

Thank you for requesting our services!

Due to an increase in outreach and program requests, RESTORE is streamlining our process so that we can continue to meet your needs. To do so, we ask that you begin using the attached Program Request Form. Forms will need to be submitted five business days before the event/program to ensure that we have staff available to cover.

RESTORE is dedicated to prevention education and changing the culture around sexual violence. Please note that there may be multiple factors that may contribute to us not being able to accommodate all requests (i.e. lack of attendance at the program, time constraints). We are happy to work with you on planning future programs, and/or provide you with our brochures and cards to have on-hand at your program or event.

Thank you for your continued support of our programs and services. We look forward to partnering with you!

Best,

The RESTORE Staff

Please email completed forms to restore@ppcwny.org. Thank you!

## 24-Hour Hotline



cards for the event/program):

## **Outreach and Education Program Request Form**

Today's Date:		
Date of Event or Education Program:	Time:	🗆 daytime 🛮 evening
Title of event/program:		
School and/or location of event/program:		
Brief description of the event or program:		
Name of individual/group/organization requesting	ng the event or program:	
Contact info/Cell Phone Number:	Email:	
Expected participants:		
Pre-registration required? ☐ yes ☐ no	If yes, how many currer	ntly registered?
What methods you have used to promote this ev	ent/program:	
In what capacity will you need from RESTORE?	□ speak/present □	I in case of triggers
For RESTO	RE staff use only:	
Request reviewed (date/initials):		
Request confirmed/denied (date/initials/who is c	covering):	
Reason for denial and were accommodations ma	ade? (set up another date	time/provided brochures and