



Information Session Request Form

Group Information

1. What is the name of your group?
2. Briefly describe the group's purpose and membership.
3. How many members are in your group?
4. Please provide the name and contact information for your group lead(s).

Group Lead 1

First Name:

Last Name:

Email address:

Phone Number:

Group Lead 2

First Name:

Last Name:

Email address:

Phone Number:

Group Lead 3

First Name:

Last Name:

Email address:

Phone Number:

4. How often does your group meet?

Information Session Request

5. Is this your first meeting with representatives from homelessness prevention?

Yes

No

If no, please describe.

