

Event/Info Session Booking Request

On completion of this form, please

email to: headspace.Redcliffe@openminds.org.au, or

fax to: 07 3897 1800, or

post to: PO Box 636, Redcliffe QLD 4020



headspace
Redcliffe

Street 457 Oxley Avenue, Redcliffe QLD 4020
Mail PO Box 636, Redcliffe QLD 4020
Tel 07 3897 1897 Fax 07 3897 1800
headspace.org.au

Important information regarding your request, please read:

- All requests must be submitted to **headspace** Redcliffe in the calendar month immediately preceding the date of the event. The earlier your request is received, the more likely we are to be able to accommodate your request.
- The timeline for managing event/info session bookings will be as follows:
 - 10th of the month: Booking request received for all events occurring in the following month (where the 10th falls on a weekend/public holiday, please submit on the closest working day)
 - 10th-20th of the month: Booking request assessed by **headspace** Redcliffe
 - 20th of the month: Notification provided on whether your request has been accepted or rejected (where the 20th falls on a weekend/public holiday, you will be notified on the closest working day)
- Please note that receipt of your request does not guarantee attendance. You will be notified on the outcome of your request as per the above timeline.

Contact Details:

Name:	<input type="text"/>		
Designation:	<input type="text"/>		
School / Organisation:	<input type="text"/>		
Phone (1):	<input type="text"/>	Phone (2):	<input type="text"/>
Email Address:	<input type="text"/>		

Do you wish to be part of our mailing list? ☐ Yes ☐ No

Will the person listed above be the contact on the day of the event: ☐ Yes ☐ No

If no, please complete additional contact details below

Name:	<input type="text"/>		
Designation:	<input type="text"/>		
School / Organisation:	<input type="text"/>		
Phone (1):	<input type="text"/>	Phone (2):	<input type="text"/>
Email Address:	<input type="text"/>		

Event / Information Session Demographics: When and where

Day:	<input type="text"/>	Date:	<input type="text"/>	Time:	<input type="text"/>
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(Please include full duration of event in the time field, e.g. 12pm-2pm)

Location:	<input type="text"/>
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headspace Redcliffe Event / Information Session Booking Request

Event / Information Session Details:

What is your event: (School Assembly, MH Week Stall, Presentation to Staff, etc)

What would you like headspace Redcliffe to do? (provide a presentation, set up a merchandise/info stall, talk to students, run a Q&A Panel, etc)

If you are seeking a presentation, please indicate your preferred subject matter from the options below:

- | | | |
|--|---|--|
| <input type="checkbox"/> Meet headspace | <input type="checkbox"/> eheadspace | <input type="checkbox"/> Tips for a healthy headspace |
| <input type="checkbox"/> Mental health | <input type="checkbox"/> Stress | <input type="checkbox"/> Anxiety <input type="checkbox"/> Bullying |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Body image | <input type="checkbox"/> Understanding grief and loss |
| <input type="checkbox"/> Other, please specify | <input style="width: 400px; height: 20px; border: 1px solid black;" type="text"/> | |

We will require access to a data projector, laptop and speakers for all presentations

What is your target audience? (school students – please provide year level, staff, other agencies, etc)

How many people are you expecting on the day?

Additional Information:

OFFICE USE ONLY

Date Received:	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	Date Notified of Outcome:	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>
Project Plan completed and attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Centre Manager Approval:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>		
	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>		