



WVCHIP Workshop Request Form

Request Date: _____

County: _____

Check all that apply:

_____ Community Outreach Workshop

_____ Business Workshop

_____ Provider Workshop

_____ Faith-based Workshop

_____ School-based Workshop

Contact Person: _____

Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

Estimated # of people to attend: _____

Please return form to Pamela Gunter @ WVCHIP
1018 Kanawha Blvd. E., Suite 209
Charleston, WV 25301
Phone: (304) 558-2732 Fax: (304) 558-2741
Or email form to: pgunter@wvchip.org