



**The Park Ridge Community Health Commission
in partnership with the
Park Ridge Park District
Hosts a COMMUNITY HEALTH FAIR
SATURDAY, JUNE 22, 2019
9:30AM-12:30PM
Hodges Park**

Your organization or business is invited to participate in a community health fair. It is an opportunity for local businesses and organizations that promote health and wellness, disease education and prevention, environmental health and outreach to special populations to showcase their services as well as a chance for our residents to learn about the many local options available to them.

The Community Health Fair will be held outdoors in Hodges Park, right in front of City Hall, convenient to all in Uptown Park Ridge. A rain date will be June 29, 2019.

Participating businesses will be provided with space for an 8-foot table and can set up a display, provide information, and/or offer screenings or health awareness activities. The entry fee is \$75 for businesses and free for nonprofit organizations; a table and two chairs can be provided for an additional \$25. Participants will have the opportunity to showcase their offerings on a demonstration stage—for example, a short form fitness class, performance, or activity.

Last year was our inaugural year for this event and it was very popular. Space is limited. If you are interested in participating, please return the attached application form to parkridgecommunityhealth@gmail.com by April 15, 2019.

If you are accepted as a participant, you will receive an Eventbrite link to pay your participation fee.

Thank you for your time and consideration. We look forward to hearing from you!

Best regards,
The Park Ridge Community Health Commission

APPLICATION for: Park Ridge Community Health Fair



Business/Organization: _____

Type of Business: _____ Contact Person: _____

Address: _____

Email: _____ Phone #: _____

Set-up:

I *need* one table and two chairs for *\$25.00 fee* Yes _____ No _____

I wish to have a brief demonstration on stage Yes _____ No _____

If demonstrating; brief explanation & time required: _____

I plan to distribute the following items/materials to event attendees: _____

Provide additional information about your demonstration or exhibit here: _____

** electric, additional space, etc. are limited and granted upon final approval **

\$75.00 registration fee payable upon application approval
Non-profit organization registration fee is waived

****REGISTRATION DEADLINE APRIL 15, 2019****

Send completed applications to: parkridgecommunityhealth@gmail.com