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# Community Event Request

## Community Event Request Form

You are not required to identify yourself or submit any personal information. However, it will be helpful should we need to contact you for additional information.

Under Florida Law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, do not send electronic mail to this entity.

**Agency / Business / Event:\***

**Requester's Name:\***

**Phone #:\***

**Email Address:\***

**Event Date:\***

**Start Time:**

**End Time:**

**Description / Details:\***

**Location and Address:**

**Location Set-Up: (indoors / outdoors, tables, etc)**

Program / Service Line:

- ☐ Health Care District - Outreach
- ☐ C.L. Brumback Clinic (Medical/Dental/Behavioral Health/Mobile Clinic)
- ☐ School Health
- ☐ Trauma Agency
- ☐ E.J. Healey Center
- ☐ Lakeside Medical Center

**Services Requested:**

Staff:

- ☐ Clinical
- ☐ Non-Clinical
- ☐ Both

maximum 1 allowed

**Targeted Audience:**

**Demographics/(#attendees, age, etc.):**

**Sponsorship:**

**Upload Supplementary Information:**

Browse...



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Type the code from the image

Mandatory field(s) marked  
with \*

Submit

## Support

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[Careers - Current Team Members](#)

## Compliance

**Compliance Hotline: 1-866-633-7233**

[Compliance Page](#)

## Public Meetings

[read all public meetings](#)

C. L. Brumback Primary Care Clinics-District Clinic Holdings, Inc. Board of Directors

**Date:** April 24, 2024

**Location:**

In-Person & Zoom Meeting - SEE MEETING DETAILS INCLUDED.

Lakeside Medical Center

[39200 Hooker Highway](#)

[Belle Glade, FL 33430](#)

## Social Media

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