

**OFFICE OF THE BRONX
BOROUGH PRESIDENT**
The Bronx County Building
851 Grand Concourse
Bronx, New York 10451



Ruben Diaz Jr.
BRONX BOROUGH
PRESIDENT

The Office of Bronx Borough President Ruben Diaz Jr., in conjunction with Healthfirst and the Montefiore Medical Center, is hosting our 6th Annual Back-to-School Literacy and Health Fair. The goal of this event is to provide information to families and students who attend schools and live in The Bronx.

The Bronx Literacy and Health Fair will take place on Saturday, August 26, 2017, from 11:00 a.m. – 3:00 p.m. at Pablo Casals Middle School 181, located at 800 Baychester Avenue, Bronx NY 10475

The Borough President's office and our sponsors, Healthfirst and Montefiore Medical Center, want to partner with organizations that provide literacy and health services and support to Bronx families.

Partner Organizations can contribute in one or more of the following ways:

- Provide health and literacy related information on the day of the event;
- Provide volunteer support on the day of the event;
- Advise the event steering committee on which organizations to market to;
- Publicize the event using your organizations' networks and various channels of communication (i.e. e-lists, websites, newsletters, announcements at meetings).

If you would like to partner with us, please email or fax the attached Partnership Application by August 18, 2017 to or you can go online [here](#).

Lucille Roldan
Office of Special Events
851 Grand Concourse
Bronx, NY 10451
Email: lroldan@bronxbp.nyc.gov
Tel: (718) 590-3522
Fax: (718) 590-5355

We appreciate all of your time and effort in making this event a success. Together, we can lay the foundation to improve literacy and overall health for the families in the Bronx.



**Bronx Literacy and Health Fair
August 26, 2017
Partnership Application**

Fax Application to (718) 590-5355

Attn: Lucille Roldan

Organization	
Name	
Address	
Telephone	
Website	
<p>Brief description of your organization (Please include: purpose, activities, size of membership, and communities served)</p>	
<p>Is your organization interested in providing health and literacy related information the day of the event? Yes _____ No _____</p>	
<p>Is your organization interested in providing volunteer support the day of the event? Yes _____ No _____ If yes, how many volunteers can support? _____</p>	
Contact Person	
Name and Title	
E-mail	
Phone Number	