

Form to provide feedback on activities hosted for World Health Day 2004

Activities planned by external organizations

Kindly complete this form to report to WHO on the outcome of activities planned for World Health Day 2004

Organization Name:

Contact Name:

Address:

Town _____

Postal Code _____ Country _____

Telephone: _____

Fax: _____

E-mail address:

Short description of the Event:

Please include the subject addressed, type of activity, specific audience for which it was organized, and the attendance rate.

The activity received the following press coverage in our area:

You may attach press clippings for our reference.

This activity/event led to the following concrete actions in our community/region.

We plan a follow-up activity: No Yes

If yes, please describe the type of activity and expected outcome.

Submit this form to:

**Liaison Officer
World Health Day 2004
Department of Injuries and Violence Prevention
WHO
Avenue Appia 20
CH-1211 Geneva 27**

By Fax: +41 22 791 4332

By Email: traffic@who.int

By Website: <http://www.who.int/world-health-day/2004/en/>