



UM-NSU CARD Mobile Family Clinic Request Form

Thank you for your interest in the University of Miami-Nova Southeastern University Center for Autism & Related Disabilities' (UM-NSU CARD) Mobile Family Clinic. Please submit requests for service at least 6 weeks in advance. All requests will be reviewed by administration and assigned to the appropriate clinician(s) and/or CARD staff. UM-NSU CARD serves Miami-Dade, Broward, & Monroe Counties and services are free of charge.

Please note that the UM-NSU CARD Mobile Family Clinic is 23 feet long and 14 feet tall.

Type of Request:

- Health/Resource Fair
- Community Outreach Activity
- Autism Awareness Event
- CARD Fundraising Event

Today's Date: _____ Date of Event: _____

Name of Event: _____

Start Time: _____ End Time: _____

Name of Agency/School: _____

Name and Title of Person Requesting Service: _____

Contact Person for Event: _____

Contact Number: _____ Email Contact: _____

Event Details: _____

Location Address: _____

Number of Anticipated Participants: _____ Languages Preferred: _____

Will Table be Provided: Yes No

**Please fax this form to: (305) 284-6555
For Questions About the Mobile Family Clinic call: (305) 284-5269**

OFFICE USE ONLY

Date Received: _____ Date Assigned: _____

Staff/Shifts Assigned: _____

Disposition: _____