Blood Pressure Screenings
Blood Glucose Screenings
Prostate Health Information
Participating Locations Statewide

www.in.gov/icssbm
info@icssbm.in.gov

2016 SHOP REGISTRATION FORM

The Indiana Commission on the Social Status of Black Males in conjunction with local commissions and community partners will initiative the Indiana Black Barbershop Health Initiative to provide screenings for Black males in the state of Indiana for cardiovascular disease and diabetes. During the Black Barbershop Health Initiative, volunteers will measure blood pressures, screen for diabetes and provide educational information to men for prostate cancer screenings. Individuals with abnormal findings will be provided a local Medical Resource Guide to assist them to obtain additional medical services and treatment.

NAME OF SHOP: _____
MANAGER_____PHONE:_____
NAME OF OWNER/REPRESENTATIVE: _____PHONE:_____
ADDITIONAL CONTACT INFORMATION: CELL: _____EMAIL_____
SHOP ADDRESS: _____CITY_____ST_____ZIP_____
SQUARE FOOTAGE OF SHOP: _____Is there good parking: Yes____ No_____
LOCATION TO PLACE TABLE: _____
NUMBER OF BARBERS: _____ * T-Shirt Sizes: Med _____ LG _____ XLG _____2X_____3X_____

I, the Owner/Representative of this Barbershop agree to provide my barbershop as an official location for the Indiana Black Barbershop Health Initiative on Saturday, April 11, 2015. Volunteers and other personnel associated with the event can have access to my shop starting at 8:30AM and may remain until all activities (monitoring of clients, clean-up, and equipment/supply retrieval) have concluded on the day of the event. I also grant my permission to receive the delivery of equipment and supplies associated with the event 1-2 days prior to the event which may remain on my premises until the Monday immediately following the event.

_____ _____ _____ _____
Barbershop Owner/Representative Signature Print Signature Date

_____ _____

IBBHI Representative Signature Print Signature Date_____