

FREE BLOOD PRESSURE ASSESSMENTS

Name of Community

CHAP Session Location	Location #1 Name	Location #2 Name	Location #3 Name	Location #4 Name
Address				
Date	<i>ie). Every Monday</i>	<i>ie). First Wednesday of the month</i>	<i>ie). 2nd Friday of the month</i>	<i>ie). Last Tuesday of the Month</i>
Time				

**For more information,
Call the Local CHAP Coordinator at:**

XXX-XXXX

www.chaprogram.ca

Put Local Lead
Organization Logo Here

