

PARTICIPATION / SPONSORSHIP COMMITMENT FORM

EVENT DATE: August 6, 2019 SUBMIT REGISTRATION BY: July 26, 2019

YOUR NAME:	
NAME OF AGENCY:	
AGENCY PHONE #:	
AGENCY FAX #:	
E-MAIL:	
MAILING ADDRESS:	
WILL YOU REQUIRE A TABLE? I	ELECTRICITY?
SPONSORSHIP INFORMATION:	

*PLEASE PROVIDE AN INTERACTIVE ACTIVITY FOR THE COMMUNITY TO PARTICIPATE IN & INDICATE WHETHER OR NOT YOU REQUIRE A TABLE, CHAIRS OR ELECTRICITY.

*PARTICIPANTS ARE REQUESTED TO RAFFLE AN ITEM(S) FROM YOUR BOOTH THAT PROMOTES HEALTHY LIFE STYLES, SAFETY, COMMUNITY SPIRIT, OR EDUCATION.

*IF YOU WOULD LIKE TO BE A SPONSOR OR MAKE A DONATION FOR THE EVENT, PLEASE MAKE CHECKS PAYABLE TO THE PJ NATIONAL NIGHT OUT COMMITTEE.

E-MAIL completed form to: kcolley@portjervispolice.com

For additional information or questions please contact Chief Worden or Kristin Colley at 845-858-4065.