

**Franconia Township Police Department's**  
**2009 National Night Out Against Crime**  
**Participant Information Sheet**

This sheet is recommended, but not required. It will be used to help coordinate and plan our National Night Out and assist your organization on the night of the event. Please send the completed form to the address or fax number below. If you are a repeat participant, and your information has not changed since last year, you do not need to send in a new form. Thank you for helping to make this year's celebration a huge success!

**Organization / Participant Information:**

Business Name: \_\_\_\_\_

Attendee's Names: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

Services Providing: \_\_\_\_\_

**Event information:**

Type of display and size: \_\_\_\_\_

Will you need electric?    y / n    Will you need a table?    y / n

Will you need chairs?    y / n    Will you need table cover? y / n

Will you be able to provide your own pop-up canopy if you have a display? y / n

Contact name for night of event: \_\_\_\_\_

Contact cell phone number for night of event: \_\_\_\_\_

If a rain delay is called, will you be able to participate on the rain date? y / n



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