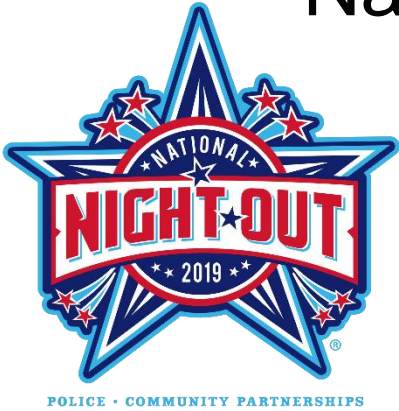


National Night Out 2019



Registration Form

My organization will participate in the 36th Annual National Night Out on Tuesday, August 6, 2019.

My organization type: (check one)

- | | |
|---|--|
| <input type="checkbox"/> Block | <input type="checkbox"/> Community Center |
| <input type="checkbox"/> Neighborhood | <input type="checkbox"/> Apartment complex |
| <input type="checkbox"/> Neighborhood Association | <input type="checkbox"/> Church |
| <input type="checkbox"/> Other (Please specify) _____ | |

Name of Participating Organization: _____

Contact Person: _____

Mailing Address: _____

If the activity location address is different than the mailing address list the address of the event location also:

Address: _____

Email: _____ Phone: _____

Event Start Time: _____ Event Ending Time: _____

Thank you for your interest in participation and support! We look forward to strengthening our partnership with you to improve our community.

Please return form by Wednesday, July 31, 2019 to:
Emeryville Police Department
2449 Powell St

Each party must provide an email address
for communication.

For more information please call: Lieutenant Allen 510 596-3752