

National Night Out

Tuesday, October 5, 2010

6-8 P.M.

Port Aransas, Texas 78373

361-749-6241 Fax 361-749-7892

Participation Form

Person's or Organization's Name: _____

Address: _____

Contact Name: _____ Title: _____

Tel.#: _____ Email: _____

Additional Info: _____

Description of booth/display and list any activities you plan to use:

Do you wish to display a NNO Banner in your yard? _____ Yes _____ No

Will you be distributing flyers of your event? _____ Yes _____ No

Do you want your name published in local newspaper _____ Yes _____ No

Donations

_____ Yes We will be participating in National Night Out on October 5, 2010.

_____ No We will not be sponsoring an event but would like to make a donation to help support this great cause.

Check amount \$ _____ .00

Other Donation(s): type/description _____

Please make checks payable to: City of Port Aransas NNO
705 W. Avenue A
Port Aransas, Texas 78373

"Improving our town, together!"