



National Night Out

VENDOR REGISTRATION

email to gthomas@5CornersDistrict.org

Yes, we will attend as a: *food/food truck vendor* *vendor* *volunteer* *performer*

No, but please keep us on the mailing list for upcoming events & notifications.

VENDOR INFORMATION

Business/Organization name: _____ *Is this a food truck?* _____

Contact: _____

Address: _____

email: _____

phone: _____

What will be passed out or (type of food) sold? _____

Will there be giveaways offered?: _____

The District can provide a table, 2 chairs and tent. Will you need this set up?:

PERFORMER INFORMATION

Group/Organization name: _____

Contact: _____

Address: _____

email: _____

phone: _____

Performance type?: *dance* *vocal* *other* *specify:* _____

Performance length? (30 minutes maximum): _____ *Number of Performers?:* _____

VOLUNTEER INFORMATION

Name: _____

Address: _____

email: _____

phone: _____

How many hours can you volunteer?: _____