

National Night Out 2018



POLICE • COMMUNITY PARTNERSHIPS

Registration Form



My organization will participate in the 35th Annual National Night Out on **Tuesday, August 7, 2018.**

My organization type: (check one)

Block

Community Center

Neighborhood

Apartment complex

Neighborhood Association

Church

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 Numbers: (cell) _____ (Home/Office) _____

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 Friday, July 20, 2018 to:
Emeryville Police Department
2449 Powell St**

**Each party must provide an email address
for communication.**