

TRUNK OR TREAT APPLICATION

Name: _____

Company: _____

Address: _____

Telephone: _____

Email: _____

Vehicle: _____

Registration: _____

Theme: _____

Sponsor must receive all applications no later than Monday, October 27th at:

New Life Church
84 Nottingham Road
Raymond, NH 03077
Office 603-895-6041 Fax 603-895-0530

Sponsor may deny Applicant's participation at the event without advance notice and Applicant agrees to immediately vacate the festivities without incident.

Sponsor will not be responsible for any damages incurred by Applicant at this event.

Applicant agrees to participate in Trunk or Treat in accordance with the guidelines described in the Trunk or Treat Guidelines made available to Applicant.

_____ Please initial to acknowledge receipt of the Trunk or Treat Guidelines.

Applicant's Signature

Date