Trunk Or Treat

Car Trunk Registration Form

Name of Organization/Business/Individual: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Additional Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vehicle Plate #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Make/Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Car Trunk Theme: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please sign below that you will adhere to the following policies and Green Level Park and Recreation’s waiver:

• Only pre-packaged candy or treats are approved

• NO spooky or scary displays

• All car trunks must be registered with the P&R department. All trunk participants will receive confirmation with instructions prior to the event.

• All car trunk displays and treats will be inspected before the event begins.

• No electricity will not be provided

• An adult and/or parent must be with their vehicle at all times during the Trunk or Treat event for safety reasons.

• Any photographs taken at or during the event of yourself, or vehicle, can be used for the Town of Green Level promotional purposes. We will have a best dressed vehicle contest for all participating car trunks! Vehicle space will be limited, so please return this form no later than Friday, October 16th! ...and don’t forget to wear your costume!!

FORM NOT VALID UNLESS SIGNED HERE BY ADULT PARTICIPANT: Participation in this program may involve risk of injury. As a parent, guardian, or participant, I am aware of these hazards and my ability to participate. In consideration for participation in the program(s) listed above, I hereby for myself, my heirs, executors and administrators waive and release any and all claims of damage against the Town of Green Level, its successors and assigns, employees, agents, and representatives for any and all kinds of injury, including but not limited to personal injury and/or property damage suffered by my child, or

myself, or my ward, while participating in this activity. In addition, I give my permission for the child(ren) to be treated by qualified medical personnel in the event that the above named parent/guardian cannot be reached at the phone numbers above.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Town of Green Level Park and Recreation