



# Participant Form

**October 12th, 2019  
9:00 am - 2:00 pm**

Organization/Business Name:

\_\_\_\_\_

Contact Name: \_\_\_\_\_

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

\_\_\_\_\_

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

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

Planned Children's Activity: *\*\* Please note: Incomplete forms will NOT be accepted. \*\**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**If you need water or electric, please call us to check for availability BEFORE turning in your form.**

**Return forms to:**

**Sidney Alive**

**109 South Ohio Avenue**

**Sidney, Ohio 45365**

**Phone: 937-658-6945**

**office@sidneyalive.org**

Please return completed form no later than  
Friday, September 27th.

Forms will not be accepted past this date.

FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_

By: \_\_\_\_\_

Electric? \_\_\_\_\_ Water? \_\_\_\_\_ Notes: \_\_\_\_\_