

# Block Party Signature Form

Date of Block Party \_\_\_\_\_

Location of Block Party \_\_\_\_\_

Time of Block Party (start & end times) \_\_\_\_\_

Organizer's Name \_\_\_\_\_

**By signing below you indicate your support of the Block Party**

Name (Please Print)	Address	Signature

**Organizer** - Please email this form to [lreyes@portmoody.ca](mailto:lreyes@portmoody.ca) or drop off at the front counter located in the Recreation Complex, 300 loco Road, Attention Laura Reyes.