

# NATIONAL NIGHT OUT 2009 REGISTRATION FORM

NAME OF BUSINESS:

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BUSINESS OWNER:

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BUSINESS ADDRESS:

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PHONE NUMBER AND EMAIL ADDRESS:

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**PLEASE CHECK ALL THAT APPLY:**

I WISH TO PARTICIPATE IN THE 2009 NATIONAL NIGHT OUT AS A VENDOR  
Please describe type of service and/or merchandise: \_\_\_\_\_

I WISH TO PARTICIPATE AS A VOLUNTEER

I WISH TO PARTICIPATE AS A FINANCIAL SPONSOR

For more information contact Joyce May at the River Vale Police Department  
(201-664-2346 Ext. 1103 or [jmay@rivervalenj.org](mailto:jmay@rivervalenj.org) or Fax: (201) 358-7750