

Fairfax County National Night Out Event Registration

Name of Community/Neighborhood _____

Contact Person _____

E-mail address _____

Phone Number _____

Type of Event (i.e. cookout, ice cream social, lights on campaign)

Location of Event (type of location and address i.e. pool at 1801 Cameron Glen Dr.)

Time of Event (start and finish, please) _____

How many people are you expecting? _____

Did you have an event in your community last year? _____



Please return this form or send the event specifics directly to your appropriate Crime Prevention Officer.



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