



2016 HALLOWEEN FEST

Participant Form

In order to have the grandest Halloween Fest ever, WE NEED YOU!
Let's transform our Main Street into the best East End Halloween Hometown!
The best volunteers don't necessarily have extra time - but they do have extra heart!

ORGANIZATION NAME: _____ DATE: _____

CONTACT NAME: _____

ADDRESS: _____

E-MAIL: _____

PHONE _____

I WILL HOST A TRICK OR TREAT STATION 2-5 PM

I WANT TO DECORATE A LAMP POST

TABLE 1: _____

LOCATION 1: _____

(businesses get first choice in front of their locations)

TABLE 2: _____

LOCATION 2: _____

I WOULD LIKE TO PARTICIPATE BY: (CIRCLE AS MANY AS YOU WANT!)

POETRY CHARACTER PERFORMER MUSIC ART DECORATING PROPS DONATION

PARADE ENTRY - (DESCRIPTION REQUIRED)

Brief Description

All organizations who are confirmed to participate in the parade will be contacted by the Halloween Parade Staff.
All participants in the Halloween Parade do so on a volunteer basis, and are not compensated for their efforts.

email: halloweenfestriverhead@gmail.com
call: 631-591-0722

MAIL OR DROP OFF:
HalloweenFest
C/O Riverhead BIDMA, 200 Howell Ave, Riverhead, NY 11901