



2019 National Night Out Exhibitor Registration Form



Organization Name:

Type of Business:

Contact Person:

Address:

Contact Email:

Phone #:

Set-up:

I will bring my own tables and chair(s) Yes No

I **need** a table and chairs provided for me Yes No

I will need additional services for my table Yes No

If **yes**, please explain what services are needed:

I plan to distribute the following items/materials to NNO attendees

Please provide any additional information we need to be aware of:

Please mail or fax this form to

Sgt. Anthony Scipione
Email: as@vniles.com
Niles Police Department
7000 W. Touhy
Niles, IL 60714
Telephone 847-588-6500
Facsimile 847-588-6551