



**NAME:**

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**ADDRESS/LOCATION OF NNO EVENT:**

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**TYPE OF EVENT (COOKOUT/BLOCK PARTY ETC.)**

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**CONTACT PERSON:**

**EVENT TIME START:**

**END:**

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**PHONE #:**

**EMAIL:**

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**EXPECTED NUMBER OF ATTENDEES:**

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Please complete this form and return to: Attn: Kim Taylor,  
4005 Office Plaza Blvd., Indianapolis, IN 46254  
317-327-6572 or email: Kim.Taylor@indy.gov

**FOR MORE INFORMATION ON THE NATIONAL NIGHT OUT EVENT PLEASE  
VISIT: [WWW.NATW.ORG](http://WWW.NATW.ORG)**