

Message on Sign Submission Form

Name of Organization: _____

Contact Information:

Contact Person _____

Telephone Number _____

E-mail or Fax _____

Event

Type of Message Electronic Banner

Location of Message _____

Name of Event _____

Event Description _____

Date(s) & Time(s) _____

Location of Event _____

Contact for Info _____

Tickets Required YES NO

Message _____

I have read and understand the Municipality's Messaging Policy

NAME

DATE

SIGNATURE