



CORALVILLE NATIONAL NIGHT OUT PARTY REGISTRATION FORM

Tuesday, August 3, 2021

Group/Organization/Block Name: _____

Contact Person: Name _____

Phone _____

Address _____

Email Address _____

Location of Party: _____

Party Time: Start _____ End _____

Estimated Number Attending: Adults _____ Children _____

Do you need street barricades? Yes No

If yes, where will barricades be placed during your party?

Visitors Requested (check all that apply): Coralville Police Department

Due to the anticipated number of parties,
we are unable to make specific commitments

Coralville Fire Department

Coralville City Council

Special instructions or requests:

**Online registration forms available at www.coralville.org/NationalNightOut
Please return your registration form by July 27, 2021**

Email: knicholson@coralville.org

Fax: 319.248.1888

Mail: 1503 5th Street
Coralville, IA 52241