

Paint the Town 2018



REGISTRATION FORM

Saturday, September 15th • 12pm to...

C A P A

Registration/bag pickup has moved to the drive next to the American Legion- 306 East Main. Look for banner.

GROUP #	SQUARE #
<i>For office use only.</i>	

REGISTRATION FEES

Early Registrations - \$13.00 per painter

After 4 pm Thursday September 13th - \$18.00 per painter

- NOTE:** 1 Registration Form secures **1 square ONLY**
- Participants may register to reserve adjacent squares. To do so, submit registrations together. (Multiple checks will be accepted)
- Squares are limited and filled on a first come, first served basis.
- Appointment of squares is FINAL.
- Please make checks payable to: CAPA

LOCATION PREFERENCE - (see map online)
*You are not guaranteed any of these locations.
 First come, first come basis.*

1st choice:
2nd choice:
3rd choice:

WAYS TO REGISTER

Mail Registration and Payment

CAPA
P.O. Box 45
Morrison, IL 61270

Drop off Registration and Payment

City of Morrison
200 West Main Street
Morrison, IL 61270

Questions? Please call (815) 772-7657 (City of Morrison) or visit us on the Web at www.paintthetownmorrison.com

Painter: (Remember your **group name** at the registration table to pick up paint supplies for your square) If you are registering multiple squares for a group with more than one last name please **choose ONE first & last name** to be used to pickup supplies for all squares - see right side.

Group Name (First & Last) Give to Registration Day of the Event: _____

Painter's Name _____ Age _____ Phone # _____

Email _____ City _____ State _____

Paint the Town nor CAPA will NOT release your information to a second party. We will use for future registration notices and event news.

(Please PRINT Group Name on Right Margin of Form)

Participant consent, waiver and release of liability

Registration will not be accepted without signature and payment of appropriate fee. In consideration of accepting this entry, I waive and release any and all rights and claims for damages I may have against anyone associated with this event, their representatives and successors. I further waive all rights and claims to any and all injuries suffered by me in this event. I will additionally permit the free use of my name and pictures in multimedia and promotional material, including website, and social media sites. This entry is invalid unless signed.

Signature of Participant OR Parent/Guardian if under 18

Date

GROUP (FIRST & LAST) NAME:
(Please Print) person picking up supplies @ registration tent - only one name (first & last)

Circle One

T-SHIRT SIZE	YOUTH XS	YOUTH SM	YOUTH MED	ADULT SM	ADULT MED	ADULT LG	ADULT XL	ADULT XXL
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