## C O M M U N I T Y S I G N

## APPLICATION FORM

## **INSTRUCTIONS**

- 1. All Organization and contact information must be completed in full.
- 2. One letter/number/character per box including spaces.
- 3. Gambling events are not eligible for display. (Tricky Trays, etc. are gambling events)
- 4. Display dates range from 1-7 days subject to availability.

This form can be printed out and after completion, either emailed to <u>receptionist@westmilford.org</u> or faxed to 973-728-2704 or hand delivered to the Clerk's Office during regular business hours. Submission of this form does not guarantee that your event will be displayed. The Township sign is used for community events only; no personal messages. The Township of West Milford reserves all rights and assumes no responsibility for accuracy or completeness of each message.

| NAME OF ORGANIZATION    |      |      |     |     |    |     |   |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-------------------------|------|------|-----|-----|----|-----|---|----|--|--|--|--|--|--|--|--|--|--|--|--|--|
| MAILI                   | NG A | ٩DD  | RES | SS  |    |     | _ |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                         |      |      |     |     |    |     | _ |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| CONTA                   | АСТ  | PER  | SO  | N   |    |     | _ |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TELEP                   | HON  | JE N | UM  | BER |    |     | _ |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| REQUE                   | ESTE | ED D | ISP | LAY | DA | TES | - | to |  |  |  |  |  |  |  |  |  |  |  |  |  |
| MESSAGE TO BE DISPLAYED |      |      |     |     |    |     |   |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Line 1                  |      |      |     |     |    |     |   |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Line 2                  |      |      |     |     |    |     |   |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Line 3                  |      |      |     |     |    |     |   |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Line 4                  |      |      |     |     |    |     |   |    |  |  |  |  |  |  |  |  |  |  |  |  |  |