



NEIGHBOURHOOD BLOCK PARTY APPLICATION

Organizers Name: _____

Phone Number: _____

Email address: _____

Location of Neighborhood Block Party: _____

Date of Event: _____ Rain Out Date: _____

Theme: _____

Activities: _____

Please fax this completed form to 780-645-5512 or email to fcss@town.stpaul.ab.ca or drop off at St Paul Regional Family and Community Support Services (FCSS) 5002 – 51 Avenue.

Thank you for having a Neighborhood Block Party! It is a great way to get to know your neighbors as well as build and reinforce neighborhood and community security.

Remember, each neighborhood can be reimbursed a maximum of \$200.00 for one Neighborhood Block Party per year!

For Office Use Only

Approved: _____ Initials: _____ Last NBP: _____

Signature: _____ Printed Name: _____

Box 1480, 5002 – 51 Ave., St. Paul, AB • T0A 3A0 • Ph. 780-645-5311 • Fax: 780-645-5512

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