REGISTRATION

SUB EVENT INFO



WALKOFTHEUNDEAD98520@GMAIL.COM

Use this form if you are Building a major Sub-Event for WOTU2024*. We want to make sure to highlight all activities happening. It is an established goal of this event- to credit and market the participating community's establishments and leaders.

CONTACT INFO: who's in charge of this & how to reach them WHAT'S IT ALL ABOUT: aka- our WOTU mission (Not the hokey pokey for sure!) First Name: WOTU is an All-Day, All-Community, Event. Last Name: _____ The intent is to put the spotlight on local businesses, organizations, & services while entertaining Joe Public*. Phone: _ __OK to Text:Y Home *Joe Public includes EVERYONE —ALL AGES, ALL SIZES, ALL PAY Email: ** Work
** It is required that you have an email, it doesn't have to be yours but we need an GRADES— Residents & Visitors! Dead or Alive! electronic method to contact all participants. REPRESENTING: group-org-or business **if applicable WHAT'S THE PLAN: What you want to do, How you plan to do it? Click All Boxes that apply to Need power, special location or other considerations? Let us Non-profit Individual Retail Seniors Your Entry know and we will try our best to accomodate. Type below. Group/Club ___ Have your plan laid out in another program or format? Fill out Company: _____ Email: _____ the contact info etc. and attach your plan to an email. Phone: Send to: WalkOfTheUndead98520@gmail.com Mailing Address: Otherwise-type below. (continue on back or additional page if State:_____Zip:____ needed. Website: _____ We Have Insurance: Y Insurance Provider: _ **Expiration date of policy:** HOW CAN PEOPLE FOLLOW YOU: We use these Social Media platforms Linked In Facebook Instagram Pinterest YouTube Web Address URL: _ DISCLAIMER: Additional Info: example- other targets, find new members, fundraising etc. The Walk of the Undead Event and its representatives will not be held reponsible for any known or unknown Damage, Injuries, Losses, Judgements, and/or Claims from any cause of personal property while attending The Walk of the Undead Event. I understand and agree to these terms. Yes, I understand Signature: -

WE ARE PARTNERING: with who? (another biz, an org, etc)

It's fine to share the fun, share the load. We just need to know who will be partnering. Also, they will need to submit their own registration.

Company:	
Contact Person	



CONTACT US: fill it out- send it back

WalkOfTheUndead98520@gmail.com (360) 580-6127



WalkOfTheUndead98520.com