



CHARITY DETAILS FORM

Organization Name: _____ Event Location: _____

Select Partnership with Number of Volunteers (Excluding onsite booth):

Color Zone: _____ (Min. 6 + 2 for booth)

Parking : _____ (Min. 8 + 2 for booth)

Beer/ Wine : _____ (Min. 4 + 2 for booth)

Setup/ Teardown: _____ (Min. 11 + 2 for booth)

Point of Contact Information:

Name: _____ Phone: _____

Organization Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Website: _____

Do you have (please circle): Facebook, Twitter, Instagram Hashtag: _____

Festival Information:

Total number of attendees: _____ *(Please consider an extra 2+ volunteers to be stationed at your vendor booth)*

6' Table and festival space (to be provided by The Neon Run) Yes _____ No _____

If you would like your organization's logo or social media information to appear on The Neon Run website and participant email list, please send your logo to: assistant@theneonrun.com

Signature Print Date

Thank you for your participation. We are looking forward to working with your cause. Please note that it is YOUR responsibility as the Main Point of Contact to inform all instructions to volunteers, organization, and ticket holders. This is including but not limited to: maps, parking procedures, ticket registration protocol and deadline, check in times, team responsibilities, etc.