



DOWNTOWN FRANKLIN  
SATURDAY, OCTOBER 23

2021 TRICK YOUR TRUNK/  
TRICK THE TOWN ENTRY FORM

REGISTRATION FORM (EVENT FROM 5:00-7:00PM)

Company/Group Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_ Male: \_\_\_\_ Female: \_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

E-mail: \_\_\_\_\_

REGISTRATION IS FREE, BUT YOU MUST PROVIDE  
YOUR OWN CANDY FOR THE EVENT!

I WILL BE DECORATING A  
TRUNK AND HANDING OUT CANDY

**TRUNK PARTICIPANT GUIDELINES**

- Must provide candy
- Trunk set up from 3:30-4:45pm (*must be set up by 4:45pm for judging - prizes for most original, funniest, scariest*)
- Trunks must stay from 5-7pm (*no early dismissal*)

*Trunks will be located on N. Main Street from Jefferson Street to King Street*

I AM A BUSINESS AND WILL  
HAND OUT CANDY FROM MY  
BUSINESS

**BUSINESS OWNER GUIDELINES**

- Must provide candy
- Must remain open for entire time (*5-7pm*)

*A map will be distributed that will show areas and participating businesses. Registration deadline (to be included on the map) is Wednesday, October 13th.*

**WAIVER STATEMENT (Must be signed; parent or guardian must sign if participant is under 18)**

I recognize that because of the potentially hazardous nature of this activity that an injury might be sustained. In the event of such an injury to myself or my child, if I or my spouse cannot be contacted, I give my permission to the attending physician to render such treatment as would be normal and agree to pay the usual charges for such treatment. I now release the City of Franklin, The Franklin Parks & Recreation Dept., its employees, volunteers, agents and assigns from responsibility for any personal injuries and damages to property caused by or having any relation to this activity. I understand that this release applies to any present or future injuries and that it binds my heirs, executors and administrators. I understand that participants may be photographed or videotaped. I have read this release and sign it voluntarily and with full knowledge of its significance.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Register at the Recreation Center or mail to:  
Franklin Parks & Recreation, 396 Branigin Blvd., Franklin, Indiana 46131

Questions? Contact Holly at (317) 346-1198 or email at hjohnston@franklin.in.gov.