

Community Event Registration



Community Event Contact Information

LAST NAME:

FIRST NAME:

EMAIL:

PHONE NUMBER:

STREET
ADDRESS:

CITY:

STATE:

ZIP:

Would you like to receive communication from SOF?

Event Information

Describe the volunteer event here. Be sure to include the name of your organization, the name of the event, date, time, and location. Community event names cannot include Sentinels of Freedom. You can state that you will be "making a donation to Sentinels of Freedom", "benefiting Sentinels of Freedom", or "in support of Sentinels of Freedom"

Sponsoring
Organization,
if applicable

Event Name:

Event
Description:

Date:

Number of
Attendees:

Event
Location:

Event Address:

CITY:

State:

Zip:

Public Contact Information

Please provide contact information for your event, this will be made public unless you check the box below to not publicize the event on our website or Facebook.

Yes, make event information and contact public

Contact Name:

Website:

Email and/or
phone:

SUPPLIES

The following is not guaranteed and is based on availability.

SUPPLIES: SOF Representative
 SOF Marketing Brochures
 SOF Executive Reports
 Pens or giveaways

Acknowledgement

I have read and agree to follow the Community Fundraising Event Guidelines. By completing and signing the Community Fundraising Event Application, you agree to adhere to the Community Event Fundraising Guidelines.

I accept the terms and conditions in the Community Event Guidelines.