

TOWN OF MONROE

PARKS & RECREATION DEPARTMENT

7 Fan Hill Road Monroe, CT 06468 Phone: 203-452-2806 www.monroerec.org





Phone

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Company Name

Scarecrow Contest 2020 Registration

	Address		
Contact Name	Contact Email	Contact Phone Num	ber
	Theme of scared	crow	
1 st choice:	2 nd choice:	3 rd choice:	
Date you will b	e setting up scarecrow. Choose	e from 10/8, 10/9, 10/10, 10/11	
PAYMENT IN	FORMATION – all info m	nust be complete to process	S
	\$75 per Scare		
Check # Amt.		e the driver's license # of person writi	ng check
	for paym	nent to be accepted.	
Master Card Visa	Discover	Expiration Date Se	lLlL ecurity Code
lame as appears on card		•	om back of card
	16 1166		
	if different please provide billing address below	[include city, state and zip]	
Billing address is same as address above.			
	YES NO. If yes, please provide company na	ame	
s this a commercial/company credit card	YES NO. If yes, please provide company na		
By my signature, I authorize the Town of Mo	YES NO. If yes, please provide company na		