## Indian Trail's Halloween Candy Crawl Friday, October 28, 2011 6pm, Movie at 7p.m.

## **Costume Contest Form - Please Arrive by 6pm**

## Completed form must accompany EACH entry

Address: Street/PO Box	City	State	Zip Code
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Telephone: Work/Cell	L-ma		
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One winner will be awarded in each		e group.	
Entry forms must be filled out com	* '	1 1 1 1 1	1 0
An entry number will be issued to			oped off.
An itinerary of when the winners w			L., 1,
Employees of the Town of Indian T	trail, contest judges and th	eir immediate famil	iy members ai
not eligible to enter.			
<b>Age Group:</b> (Please Circle One) <b>0</b> -	-4 5-8 9-12		
Category: (Please Circle One) M	ost Creative Scariest	<b>Funniest</b>	
igning this form signifies that I have really Ve/I,	the "Indemnifying In Trail (the "Town"), its officer	Party"), agrees to protects, employees, represent	ct, defend, inden tatives and agen
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