



Denton Baptist Association

Block Party Application

Date: _____

Applicant Information

Name of Church: _____

Contact Person: _____ Cell Phone: _____

Mailing Address: _____
Street Address *Apartment/Unit #*

City _____ State _____ ZIP Code _____

Phone: _____ Email _____

Event Request

Requested date of use: _____ Time of Event: _____

Pick up Date: _____ Return Date: _____

Description and address of event: _____

Where will the trailer be stored? _____

Who will be the drivers? (must be 21 and older) _____

Signature: _____ Date: _____

Office Use Only

Usage Fee Received \$50 _____ Date _____ PayPal or check? Check # _____
Liability Form Received _____ Date _____

After Event:
BPT Checklist Received _____ Date _____ BPT Highlights Form Received _____ Date _____