Celebration Event Registration Form

Section 1 – Organisation's details

Name of Organisation
Address Post code:
Telephone number/email address Telephone Number: Email address:
Contact details of main contact Name: Address: Telephone number: Email address:
Please provide the details of a second contact person in case main contact is not available Name: Address: Telephone number: Email address:

Section 2 – Reasons for application

What you would like for/at the event
Reasons for the requested
Name: Position in organisation: Signature: Date:

Please return the form to:

Kate Marshall: katemarshall@gateshead.gov.uk / 0191 433 3255
Sian Wishart: sianwishart@gateshead.gov.uk / 0191 433 2499
Neighbourhood Management & Volunteering
Gateshead Council
Civic Centre
Regent Street
Gateshead
NE8 1HH