



Junior Orange Bowl FAMILY DAY

Tropical Park
7900 SW 40th ST
Miami, FL 33155

Wellness Fair Including:

- Carnival Games
- Entertainment
- Educational Resources
- Financial Services
- Health Screening
- Accessibility Awareness
- Prizes and Giveaways

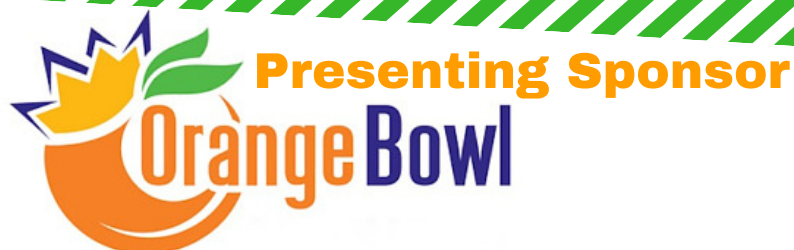
Saturday, October 1st
11am-4pm

For more information
contact us:

305.662.1210
jobc@jrorangebowl.org

Open to the public

Reserve your spot today!



**2016 Junior Orange Bowl Family Day
Tropical Park-October 1, 2016
Event Registration Form**

The Junior Orange Bowl Family Day will be held on October 1, 2016 from 11:00 am to 4:00 pm at Tropical Park. **The registration fee is \$150 and it is non-refundable.** With your signature, you agree to participate as a vendor/community partner at Family Day. Should you not be able to attend, please notify us with two (2) weeks of notice, as we are reserving space for your Business/Organization.

Name: _____ Title: _____

Business/Organization Name (if applicable): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Main Service Category:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Animals | <input type="checkbox"/> Educational | <input type="checkbox"/> International | <input type="checkbox"/> Military/Police/Fire |
| <input type="checkbox"/> Business Development | <input type="checkbox"/> Elderly | <input type="checkbox"/> Medical | <input type="checkbox"/> Sales |
| <input type="checkbox"/> City/County Services | <input type="checkbox"/> Entrepreneurship | <input type="checkbox"/> Poverty/Welfare | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Children & Youth Services | <input type="checkbox"/> Environmental | <input type="checkbox"/> Legal Resources | _____ |
| <input type="checkbox"/> Cultural Arts | <input type="checkbox"/> Health | <input type="checkbox"/> Grant Resources | |
| <input type="checkbox"/> Disabilities | <input type="checkbox"/> Housing | <input type="checkbox"/> Leadership Development/Volunteerism | |

Business/Service Description:

Details of activity your Business/Organization will host:

Payment (Make check payable to Junior Orange Bowl)

- Check M/C Visa AMEX

Name on Card: _____

Credit Card Number: _____

Zip Code: _____ Security Code: _____ Expiration Date: _____

Participant Signature: _____ Date: _____

Please send completed form to: jcerda@jrorangebowl.org

OFFICE USE ONLY:			
Sponsor <input type="checkbox"/>	Vendor <input type="checkbox"/>	In Kind Participation <input type="checkbox"/>	Donation <input type="checkbox"/>