



Registration Form

Registration Category (choose one)

- \_\_\_\_\_ Individual
- \_\_\_\_\_ Group

Community group represented (if applicable)

\_\_\_\_\_

Artist name(s)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Primary contact name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (home): \_\_\_\_\_ Phone (business/cell): \_\_\_\_\_

Email: \_\_\_\_\_

Provide a short summary of your idea/inspiration, regarding what your door mural represents (please attach additional sheet if necessary):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I understand that this door will become the property of Hazleton POWER! upon completion, and that the door will be auctioned off (at a later date to be determined).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail or drop off your completed registration form to the Downtown Hazleton Alliance for Progress, 20 West Broad Street, Hazleton, PA 18201