

Duck Pluck Activity Request

Name of activity (for example, dunk tank, ring toss, cake walk, etc...)

Person(s) requesting activity _____

Name of school or organization being represented _____

If applicable, name of group within school or organization (for example Booster Club, PTA, Drama Club, etc...) _____

Phone Number _____ Fax Number _____

Email _____

Number of volunteers needed beyond what you will provide for your activity _____

What age range does your activity cater to? _____

Does your activity require: Electricity? Y or N

Running Water? Y or N

Would you like to have an awning or shade covering provided? Y or N

Any other accommodations needed? Please specify.

Describe the game or booth you are proposing and be as specific and detailed as possible.

On a separate page, provide a diagram, photo or sketch of your activity including the amount of space that will be needed.

Please note any miscellaneous information that may be helpful to festival organizers:

Fax completed form to (916) 848-3396 **AND** mail to:

N.A.E.F. --- Attn: Duck Pluck Activities

4600 Blackrock Dr. Sacramento, CA 95835

For Committee Use Only: Approve _____ Denied _____

Date _____ Signature _____

Duck Pluck Festival Activities (916) 416-5372
