



Community Message Board Request Form

Contact Information

*Organization: _____
Address: _____
City, State, Zip: _____
*Contact Person: _____
Telephone: _____
*E-mail: _____

Message Information

Write your message exactly as you want it to appear on the screen. LIMIT of eight (8) lines down by thirty (30) characters across. Group or Event names should be placed on the first line.

Logos and Pictures may also be submitted by email (please limit to 2). Be advised that you will need releases from persons appearing in any pictures.

*Display Dates:

From: _____ To: _____

*Signature: _____ Date: _____

Please return to:

Candy Galindo
candyg@mountvernonwa.gov
TV26 (360) 419-3233
330 Pacific Place
Mount Vernon, WA 98273