**2025 Trunk or treat**

**Saturday, Oct. 25, 6-9 pm**

PLEASE PRINT – Completed application **&** hold harmless agreement (separate form) due to the Bronson Town Hall by the close of business on Oct. 24, 2025.

Name of Organization or Entry Address City State Zip Code Contact Person Phone Number(s) Email Address

Please check all that apply:

\_\_\_\_\_Individual

Church

Youth Group

Business

Non-Profit

My signature indicates my intent to participate in the 2025 Trunk or Treat. Should you have any questions or concerns, please contact Town Manager Amanda Huber via telephone at 352.486.2354 or via email at [amanda@townofbronson.org.](mailto:%20amanda@townofbronson.org.)

Contact Person’s Signature Date