



## Hosting Organization Application

*(Please print clearly and fax back to: 718-987-3909)*

Organization Name: \_\_\_\_\_

Contact Person Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Best time to call: **AM** or **PM**  
(Circle one)

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail Address of contact person: \_\_\_\_\_ @ \_\_\_\_\_

# of Total Employees in Organization: \_\_\_\_\_

Is your organization a nationwide organization:  Yes  No

Name of City/Town of desired location for Bike Run: \_\_\_\_\_

Approximate population of desired city: \_\_\_\_\_

Do you have any prior experience in hosting events:  Yes  No

If so, please give a basic description of the types of events you have previously hosted:

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