



Let's give crime a going away party!

On Tuesday, August 6, 2019 from 5:30 pm-8:30pm, Woodland residents are encouraged to celebrate National Night Out by hosting neighborhood block parties. This is a crime prevention event that is sponsored by the National Association of Town Watch and co-sponsored locally by Woodland Police Department.

Woodland Police and Fire officials along with other local law enforcement agencies will visit block parties.

National Night Out is an opportunity to

- Get to know your neighbors.
- Strengthen neighborhood spirit and police/community partnerships.
- Send a message to criminals that neighborhoods are organized and looking out for one another.

Lock your doors, turn on porch lights, and spend the evening outside with neighbors.

The City of Woodland is a nationally registered participant in this year's event.

Register your neighborhood by calling **Crime Prevention Specialist, Mini Garcia** at (530) 661-7875 or by email at crimeprevention@cityofwoodland.org.



Our Neighborhood is having a National Night Out party: Yes No

Street Address of party: _____

Party contact person: _____

Phone: _____ Email: _____

Party Hours: _____ to _____ Estimated number of guests: _____

If available, would you like Police or Fire to visit your party? Yes No

If yes, please check the activities you will be having at your party (please check all that apply):

Block Party BBQ Ice Cream Social Contests

Other: _____

How did you hear about this event? (Please check all that apply)

Woodland Police Department Facebook Nextdoor.com Other: _____

A Request for Street Closure form is included for your convenience. It is NOT necessary to close your street for your block party.

Please complete and return to Mini Garcia at 1000 Lincoln Avenue, Woodland, CA

Or by email at

crimeprevention@cityofwoodland.org

OFFICE USE ONLY:

Received: _____ Beat: _____

REQUEST FOR STREET CLOSURE NATIONAL NIGHT OUT (fee waived)



Location of closure (street): _____

BETWEEN: _____ AND _____
(Street) (Street)

Date of Closure: _____ Time of Closure: FROM: _____ TO: _____

Closure Requested by: _____

Address: _____ Phone: _____

Person Responsible during time of closure: _____

Address: _____ Phone: _____

Activities to be conducted on the street: _____

This request will be reviewed by the Traffic Division to determine if there will be a significant impact or obstruction to traffic. If your closure application is approved, you will receive instructions on how to appropriately block off your street. **You will be responsible for providing your own barricades.**

Please return all completed forms to Mini Garcia via email at crimeprevention@cityofwoodland.org or at Address below:

Woodland Police Department
1000 Lincoln Avenue
Woodland, CA 95695

OFFICE USE ONLY

Date/Time Received: _____ Received by: _____

Approved Denied By: _____ Date: _____

Reason for Denial: _____
