



BOYS & GIRLS CLUBS
OF TUSTIN

BOYS & GIRLS CLUBS OF TUSTIN PRESENTS

TRUNK OR TREAT

THURSDAY

OCTOBER 29TH, 2026

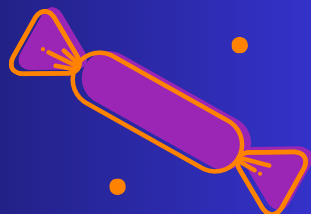
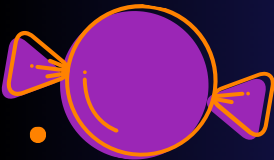
5:00 PM TO 7:00 PM

BOYS & GIRLS CLUBS OF TUSTIN PARKING LOT
580 W. 6TH STREET, TUSTIN, CA. 92780

**FREE
ADMISSION**

**GAMES,
FOOD &
FUN**

**COSTUMES
WELCOMED**





BOYS & GIRLS CLUBS OF TUSTIN PRESENTS:

TRUNK OR TREAT

**INTERESTED IN DISPLAYING A
TRUNK?**

SIGN UP TODAY, SPACES LIMITED!

**THURSDAY, OCTOBER 29TH, 2026
5:00 PM TO 7:00 PM**

**PLEASE CONTACT CINDY ISLAS @ (714) 838-5223 OR EMAIL:
CISLAS@BGCTUSTIN.ORG**





"Where quality of service matters"



BOYS & GIRLS CLUBS
OF TUSTIN

TRUNK OR TREAT

CAR TRUNK REGISTRATION FORM

NAME OF ORGANIZATION/ INDIVIDUAL: _____

CONTACT NAME(S): _____

ADDRESS: _____

CITY: _____ ZIP: _____

PHONE(1): _____ PHONE(2): _____

EMAIL: _____

VEHICLE PLATE #: _____ MAKE/MODEL: _____

CAR TRUNK/ BOOTH THEME: _____

.....

PLEASE SIGN BELOW THAT YOU ADHERE TO THE FOLLOWING POLICIES AND PROCEDURES:

- ONLY PRE-PACKAGED CANDY OR TREATS ARE APPROVED
- NO SCARY, GORE, OR WEAPON DISPLAYS
- NO POLITICAL, RELIGIOUS, OR CONTROVERSIAL ADVERTISING ON DISPLAYS OR CANDY WRAPPERS
- AN ADULT MUST REMAIN WITH THEIR VEHICLE AT ALL TIMES DURING THE TRUNK OR TREAT EVENT FOR SAFETY REASONS
- ELECTRICITY WILL NOT BE PROVIDED, BUT MAY BE ARRANGED WITH ADVANCE NOTICE
- ALL CAR TRUNK DISPLAYS AND TREATS WILL BE INSPECTED BEFORE EVENT BEGINS
- ALL PARTICIPANTS WILL RECEIVE CONFIRMATION WITH INSTRUCTIONS PRIOR TO EVENT
- I AGREE TO SIGN THE PHOTO RELEASE WAIVER DAY OF EVENT

BEST DECORATED VEHICLE CONTEST FOR ALL PARTICIPATING CAR TRUNKS!
VEHICLE SPACE WILL BE LIMITED, PLEASE RSVP BY
WEDNESDAY, OCTOBER 21ST!
...AND DON'T FORGET TO WEAR YOUR COSTUME!

I RECOGNIZE AND UNDERSTAND THAT MY VOLUNTEER ACTIVITY MAY EXPOSE ME TO THE POSSIBILITY OF INJURY TO MY PERSON AND PROPERTY AND THAT I MAY SUFFER SOME KIND OF INJURY AS A RESULT OF AN ACCIDENT AND OTHER UNFORESEEN CIRCUMSTANCES. I RECOGNIZE THAT I AM NOT COVERED BY ANY WORKERS COMPENSATION OR SIMILAR INSURANCE THAT WOULD PAY MY MEDICAL BILLS INCURRED BECAUSE OF AN INJURY. DESPITE THIS RISK OF INJURY AND LACK OF WORKERS COMPENSATION OR OTHER MEDICAL INSURANCE COVERAGE FROM THE BOYS & GIRLS CLUBS OF TUSTIN/ TUSTIN FRC, I KNOWINGLY AND VOLUNTARILY WAIVE ANY AND ALL CLAIMS, ACTIONS, OR CAUSES OF ACTION AGAINST THE BOYS & GIRLS CLUBS OF TUSTIN/ TUSTIN FRC, ITS BOARD OF DIRECTORS, AGENTS, AFFILIATES, AND EMPLOYEES HARMLESS FOR ANY INJURY OR DAMAGE THAT I MAY SUFFER AS A RESULT OF THIS ACTIVITY.

SIGNATURE: _____ **DATE:** _____