

# Blank It Out Registration of interest

Name/Name of group
Contact person
Mailing address
Email
Phone number
Mobile number
Intended area to cover

I/We (*on behalf of the group if applicable*) have read and agree to abide by the guidelines and best practices for safe tagging removal set out by the Wellington City Council Graffiti Programme, and understand that not adhering to them will mean the Wellington City Council will discontinue providing its support or resources for the individual or group.

Name	
Date	Signature

Please return this completed form in the pre-paid envelope.



Absolutely Positively  
**Wellington City Council**  
Me Heke Ki Pōneke