

# Do-Not-Knock List Enrollment

Please enroll my residence in the Callery Borough Do-Not-Knock List. I understand this enrollment ends at the end of the calendar year and that ***Callery Borough will not share my information with anyone or any entity.***

NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

PHONE CONTACT NUMBER \_\_\_\_\_

Please return this form via email to [secretary@calleryborough.com](mailto:secretary@calleryborough.com) or in person at the Borough Office.