

CITY OF MIDWAY

APPLICATION FOR PARADE/EVENT PERMIT

FOR POLICE DEPARTMENT USE ONLY:

PERMIT APPROVED

PERMIT DENIED

DATE: INITIALS:

Name of Sponsoring Organization: _____

Address: _____

Telephone: _____

Parade/Event Chairman or Contact Person: _____

Address: _____

Telephone: _____

Purpose of Parade/Event _____

Date Requested for Parade/Event: _____

Parade/Event: Start Time: _____ End Time: _____

Location of Parade/Event: _____

Parade Start Time: _____ End Time: _____

What route will be traveled by the parade: _____

Does your organization have a Liability Insurance Policy: _____

How many units will be in the parade: _____

How many booths will be in the event: _____

How many bands will be in the parade/event: _____

How many floats and what type of floats will be in the parade/event: _____

Will there be sound amplification devices used: _____

If so, what: _____

Additional Information: _____

Authorized Signature of Sponsoring Rep: _____

Attached additional sheets if necessary to answer/explain the requested parade/event.