

APPLICATION FOR SPECIAL EVENTS PERMIT (KinderPlatz Park or Pedestrian Bridge Only)

		Fee:	\$35
Name of Event			
Date of Event			
Name of Applicant	ž		<u> </u>
Name of Organization			
Applicant's Affiliation with Organization			
Applicant's Home Address	Day Phone		
	Evening Phone		
Mailing Address (if different)	E-Mail		
	Cell Phone		
	X. 8		
Name of additional contact person in case of en	mergency:		
Name	Day Phone		
	4		
Description of the proposed event:			<u> </u>
Site of the proposed event:			
Times and dates of the proposed event:			
Estimated maximum number of persons expected	d at the event:		