

CITY OF CANTON

PARADE/DEMONSTRATION PERMIT APPLICATION

This application must be filed with the Chief of Police no later than seven (7) days prior to the start of this activity. The Chief of Police has the authority to ask for any additional information he finds necessary to make a fair determination as to whether a permit for such parade or demonstration may be issued. The Chief of Police also has the authority, where good cause is shown, to consider any application for a parade or demonstration that is filed less than seven (7) days before the date of the proposed event.

DATE OF EVENT: _____ EVENT TITLE: _____

PURPOSE OR NATURE OF PARADE/DEMONSTRATION: _____

ASSEMBLY TIME: _____ START TIME: _____ DISBANDING TIME: _____

EVENT SPONSOR (group, organization or individual)

NAME: _____ PHONE NUMBER: _____

PHYSICAL ADDRESS

(Number) (Street) (City) (State) (Zip)

MAILING ADDRESS

(Number) (Street) (City) (State) (Zip)

EVENT COORDINATOR

NAME: _____ PHONE NUMBER: _____

PHYSICAL ADDRESS:

(Number) (Street) (City) (State) (Zip)

MAILING ADDRESS:

(Number) (Street) (City) (State) (Zip)

APPROXIMATE NUMBER OF PERSONS PARTICIPATING IN EVENT: _____

WILL THERE BE ANIMALS? _____ YES _____ NO NUMBER AND TYPE: _____

NUMBER OF MOTORIZED VEHICLES/FLOATS: _____

MAXIMUM DIMENSIONS OF VEHICLES/FLOATS: _____

DISTANCE TO BE MAINTAINED BETWEEN VEHICLES: _____

EVENT ROUTE OR LOCATION (Please attach a map of the route)

WHERE WILL UNITS ASSEMBLE/PARK FOR EVENT: _____

WHERE WILL EVENT START: _____

WHERE WILL EVENT END: _____

WILL AMPLIFIED SOUND BE USED: _____ YES _____ NO IF YES, PLEASE DESCRIBE: _____

WILL SECURITY BE PROVIDED: _____ YES _____ NO IF YES, PLEASE DESCRIBE: _____

WILL CITY SERVICES BE REQUIRED: _____ YES _____ NO IF YES, PLEASE DESCRIBE: _____

WILL STREET CLOSURES BE REQUIRED: _____ YES _____ NO IF YES, PLEASE DESCRIBE: _____

APPLICANT INFORMATION:

NAME: _____ PHONE NUMBER: _____

PHYSICAL ADDRESS: _____
(Number) (Street) (City) (State) (Zip)

MAILING ADDRESS: _____
(Number) (Street) (City) (State) (Zip)

DRIVERS LICENSE: _____ SOCIAL SECURITY NUMBER: _____

If the event is designed to be held by, and on behalf of or for, any person other than the applicant, the applicant for such permit shall file with the Chief of Police a communication in writing from the person proposing to hold the event, authorizing the applicant to apply for the permit on his behalf.

It shall be unlawful for any event participant or spectator to throw objects during the parade (such as candy, beads, promotional items, etc.). Penalty for violation is a fine not less than \$100.00 and not to exceed \$300.00 and/or revocation of permit.

I, the undersigned applicant, hereby affirm that the information contained in this application is true and correct to the best of my knowledge. I understand that any false or misleading statement in this application is grounds for denial of a permit, or if one has already been issued, grounds for its revocation. I also understand that I am responsible for compliance with all applicable laws and any other requirements set forth for the issuance of this permit.

Date

Applicant's Signature

ACTION TAKEN BY POLICE CHIEF: Approved Denied

If denied, reason for denial: _____

Date

Chief of Police

APPLICANT NOTIFIED:

Date Method By