

CITY OF CLAXTON

APPLICATION FOR PARADE PERMIT

Date Permit Applied : _____

Event: PARADE MARCH GATHERING OTHER _____

Name of the Event: _____

Name of Sponsor: _____

Exact Time: _____ - _____

Exact Date: _____

Exact Place: _____

Organization Point: _____

Requested route which it will follow and conclude:

Name of Person applying for permit: _____

Signature of Applicant Date

Approval: Yes No Requested More Information

Date: _____ Signature: _____