

PARADE/SPECIAL EVENT APPLICATION

Fee: \_\_\_\_\_

1. Organization: MASH Student Council  
Contact Name: Lynn Lindau Phone: (715) 965-2383  
Address: 1015 W Broadway Ave Medford WI 54451
2. On-Site Manager: Lynn Lindau Phone: (715) 965-2383  
Address: 329 Vincent St Medford WI 54451

*If the parade or special event is to be conducted by or for any person other than the applicant, the applicant for such permit shall file with the City Clerk a communication in writing from the person proposing to hold the parade or special event authorizing the applicant to apply for the permit on his/her behalf.*

3. Date of the Parade/Event: Friday, Sept. 21, 2018
4. Start Time: 2:20 pm End Time: 3:15 pm

~~SPECIAL EVENT~~

1. General Description: Homecoming Parade
2. Location: \_\_\_\_\_
3. Number & Type of Participants: (i.e., artists at Art Fair; tables at Flea Market: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Special Parking or Traffic Restrictions Required: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PARADE

1. Assembly Area: Main St. North of 64 to the library
2. Disassembly Area: South Main St. / Perkins
3. Assembly Time: 2:00 pm Disassembly Time: 3:20 pm

4. Starting Point: Main St. & Broadway Ending Point: Main St. & Perkins

5. Route: Parade will travel down Main Street, beginning at the intersection of Main Street and Broadway and finishing at the end of Main Street at Perkins Street.

6. March Units Anticipated:

- a. Bands 2
- b. Floats 20-25
- c. Motor Vehicles (Other than Floats) 3
- d. Animals or Animal Drawn Vehicles 1
- e. Oversized Vehicles 1-3
- f. Marching or Walking Units 3
- g. Other \_\_\_\_\_

7. Special Parking or Traffic Restrictions Required: No Parking on Main Street / Police Help / Traffic Control @ Main & Broadway Intersection

Applicant's Signature Lynn M. Guidau Date 7-24-18

To Be Completed By City Clerk

Date Received: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

Review:	(A)	Police Department	Approve	Disapprove
		Modification Recommended:	_____	_____
	(B)	Fire Department	Approve	Disapprove
		Modification Recommended:	_____	_____
	(C)	Public Works Department	Approve	Disapprove
		Modification Recommended:	_____	_____
	(D)	Electric Utility	Approve	Disapprove
		Modification Recommended:	_____	_____
		Final Action	Approve	Disapprove
		Modification Recommended:	_____	_____

Date Issued: \_\_\_\_\_