



City of Gering

PARADE PERMIT APPLICATION

Date of Parade _____ Starting Time _____ Termination Time _____

General Purpose of Parade _____

Organization Name/Address _____ Phone _____

Head of Organization _____ Phone _____

Location of Assembly Areas _____

Parade Route:

Starting Point: _____ Termination Point _____

Desired Route _____
(Diagram on reverse side)

If Known:

No. of Persons (bands, etc.) _____ No. and type of Animals _____ No. of Vehicles _____

Estimated Length of Parade _____ Blocks

Additional Information, Other Needs or Considerations _____

The parade will occupy **ALL** **ONLY A PORTION** of the width of the streets involved in the parade route (check one).

Parade Chairman's Name _____

Address _____ Phone _____

I have read and understand the rules and regulations set forth by the City of Gering regarding parades.

Signature Date

Have you provided a public liability insurance policy naming the City as additional insured?

Yes _____ No _____ Parades require a \$1,000,000 combined bodily injury liability and property damage liability.

Certificate of insurance received: _____
Date (City Clerk's signature)

-- PARADE PERMIT --

Reviewed by/date:

Electric Dept: _____ Police Dept: _____
Parks Dept: _____ Fire Dept: _____
Street Dept: _____ Sanitation Dept: _____
Other: _____ Water / Wastewater Dept: _____

Additional Information _____

Approved / Disapproved by Gering City Administrator: _____
Signature Date