

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:	Termin	nation Point
Desired Route		
	(Diagram on reverse side)	
If Known: No. of Persons (bands, etc.)	No. and type of Anima	als No. of Vehicles
Estimated Length of Parade	_Blocks	
Additional Information Other Needs or	· Canaidarations	
Additional information, Other Needs of	Considerations	
(check one).		idth of the streets involved in the parade route
raiade Chaifman s Name		
Address	Phone	
I have read and understand the rules and	d regulations set forth by the City	of Gering regarding parades.
Signature		Date
Signature		Buc
Have you provided a public liability insu		
i esNo		e a \$1,000,000 combined bodily injury liability and ge liability.
Coulificate of incommon manifest		
Certificate of insurance received:	Date	(City Clerk's signature)
		, ,
Reviewed by/date:	PARADE PERMIT	Γ –
Electric Dept:	Police De	ept:
Parks Dept:	Fire Den	t:
Street Dept:	Sanitatio	on Dept:
Other:	Water / V	Wastewater Dept:
Additional Information		
Approved / Disapproved by Gering City	y Administrator:	
	Signatu	ure Date

Amended: November 2009