



**SPECIAL EVENT APPLICATION - FOR LANDS AND ROADS WITHIN  
THE MUNICIPALITY OF LEAMINGTON**

1. Please print all information
2. Submit completed application 30 days prior to event
3. Please outline parade route on map attached.

DATE OF APPLICATION: \_\_\_\_\_

NAME OF ORGANIZATION \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ MOBILE NUMBER: \_\_\_\_\_

ORGANIZATION INFORMATION: STREET ADDRESS: \_\_\_\_\_

(Please Print) CITY/TOWN: \_\_\_\_\_ PROVINCE: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

TYPE OF EVENT: \_\_\_\_\_ NO. OF PARTICIPANTS: \_\_\_\_\_

DATE & TIME OF EVENT: \_\_\_\_\_

LOCATION/ADDRESS OF EVENT: \_\_\_\_\_

DETAILED INFORMATION OF EVENT: (eg. Procession route including all streets):

\_\_\_\_\_  
\_\_\_\_\_

IT IS REQUESTED THAT THE MUNICIPALITY OF LEAMINGTON PROVIDE OUR ORGANIZATION WITH THE FOLLOWING:

- POLICE ESCORT       ADDITIONAL GARBAGE FACILITIES       SNOW FENCING/BARRICADES

I, \_\_\_\_\_, acting on behalf of \_\_\_\_\_  
(name) (name of organization)

will be responsible for payment of all invoices submitted by the Municipality of Leamington for services rendered.

\_\_\_\_\_  
(Signature)

**NOTE:**

1. Please return this application to the Leamington Municipal Building, 111 Erie Street North, Leamington for circulation to various municipal departments.
  2. If more than one municipality is involved, it is the Organization's responsibility to obtain approval from each Municipality.
  3. The sponsoring organization and its officials shall be responsible for providing adequate supervision during the event and necessary equipment including signs, flags, traffic cones, if necessary.
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**OFFICE USE ONLY**

**POLICE DEPARTMENT:** Escort Service \_\_\_\_\_

**FIRE DEPARTMENT** For Information \_\_\_\_\_

**PUBLIC WORKS DEPARTMENT** Snow Fencing/Barricades \_\_\_\_\_  
Other \_\_\_\_\_  
Additional Garbage Facilities \_\_\_\_\_

PLEASE RETURN TO OFFICE BY:

AUTHORIZED BY:

\_\_\_\_\_

\_\_\_\_\_

TOTAL FEES \$ \_\_\_\_\_ (if applicable)

TOTAL DEPOSIT \$ \_\_\_\_\_ (if applicable)

GRAND TOTAL REQUIRED \$ \_\_\_\_\_