EVENT PERMIT APPLICATION

NAME OF ORGANIZATION: RED RIBBON COMMITTEE
CONTACT PERSON: (Responsible for Permit compliance). NAME: Wayne Assuberial ADDRESS: 300 Kansus City 5+. HOME PHONE: (-) WORK PHONE (605)394 - 6030
EVENT TYPE: PARADE N RALLY [] DEMONSTRATION [] OTHER [] PURPOSE: A celebration of being drug free.
TOTAL INDIVIDUAL PARTICIPANTS ANTICIPATED
TOTAL UNITS
(If yes, explain fully).
DO YOU ANTICIPATE ANY OPPOSITION TO THIS EVENT YES
EVENT DATE 10/18/03 (If event will include more than one date or time frame, describe fully on a separate sheet and attach to application).
ASSEMBLY TIME OOO PARADE START TIME 1100
ASSEMBLY AREA/S Ohara Stadium Parking Lot is the start point. Students will be dropped off at the Surbeck Center parking lot. Then the floats continue back to Ohara Stadium parkinglot.

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CITY COUNCIL	APPROVAL: []	N/A OR	[]			V	
REVIEWED BY:							
	ROBLEMS? (ORD	EVALUA	TION			N)	
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