

APPLICATION FOR A PARADE PERMIT

NAME OF ORGANIZATION:		
NAME OF APPLICANT:		
JOB TITLE OF APPLICANT:		
PHONE NUMBER:	EMAIL:	
DATE OF PARADE:	START TIME:	END TIME:
PLACE OF ASSEMBLY:	DESTINATION:	
PROPOSED ROUTE:		
ONTARIO PROVINCIAL POLICE NOT		
FIRE DEPARTMENT NOTIFIED DATE: EMS NOTIFIED DATE:		
CONFIRM SAFETY MEASURES IN PI	LACE (GUIDES, FIRST AID CERTIF	TIED PARTICIPANTS,
CELL PHONE COMMUNICATION, ET	¯C):	
PARTICIPANTS - No. ON FOOT:	No. OF VEHICLES	
Signature of Applicant		Date
(PARADE PERMIT	
		HAS BEEN
GRANTED PERMISSION TO HOLD A	PARADE ON THE DAY OF	, 20
Manager of Municipal Law Enforce		 Date