STREET USE PERMIT	APPLICATION	
FOR OFFICE USE ONLY: Permit # Date Submitted		
EVENT INFORMATION	156	
Name of Event HOMECOINTAL PARA	TUL	. <u></u>
Event Organizer/Sponsor_WEST HIGH S	CHOOL	
Is Organizer/Sponsor a 501(c)3 non-profit agency?	42341 XYes	i □ No
If Yes, provide State of Wisconsin Tax Exempt Number	014371	
Address 30 ASH STREET	57715	
City/Otalic/Zip	53715	
Remove Contact Mitch MCGG+N	-AX 608-709-3209 Phone Dyring Event 206-2689 2 Madi Son, KIZ, Wiaks	
	WMADISON, KIZ. WILKS	
Website Secondary Contact ED HOLMES Work Phone Z04-4/04 E-mail Pholmes@ Mauliston K12. Wi. u.5	Phone During Event	
Annual Event? 155 Charitable Event? 100 If Yes, name of charity to receive donations:	Mary Yes □ Yes	s B N
Estimated Attendance 11500 Public Amplification (not allowed after 11 p.m.) Hours	(CERTIFICATE OF INSURANCE MAY BE	REQUIRED MN
EVENT CATEGORY		
□ Run/Walk □ Music/Concert □ Festival Stother PARADE	☐ Rally ☐ Parking (i.e., baggir	ng meters
LOCATION REQUESTED		
☐ 30 on the Square (a.k.a. top of 100 block of State Street) Street Names and Block Numbers:	□ Podium/700-800 State Street □ Other (specific blocks/streets requested belo	ow)
EVENT DATE(S)/SCHEDULE		
Event Start Date(s)/Time(s) 12:00 NODN	Rain Date(s) Set-Up Date(s)/Time for Event NON 10/ Take-Down Time 3:45 pm 10/5)12	5/12
APPLICATION SIGNATURE	Take-Down Time: start to streets	
I/We waive the 21-day decision requirement.		ASE INITIAL
Your signature below indicates that you have read and understand Further, the person/group named in this application will be responsible reserved area. Falsification of information on the application will be reserved.	isible for the conduct of the group and for the c	onaition c
In addition to the rules and regulations detailed in the permit appli are subject to all applicable ordinances, statues and laws.	ication instructions and guidelines, Street Use I	Permits
Signature Man Man	Date_/0-5	5-12