STREET USE PERMIT APPLICATION						
FOR OFFICE USE ON	LY: Permit # Date Su	ıbmitted	_			
EVENT INFORM						
Name of Event	Midwest Mor	cris He				
Event Organizer/S	ponsor Bak Appl	le Morri	s Dancess			
Is Organizer/Spon	sor a 501(c)3 non-profit agen				Yes	□ No
If Yes, provide State	te of Wisconsin Tax Exempt N	NumberŒ	5# 06402	3		
Address(O	05 Sherman	Ave			*	
City/State/Zip	ladison, WI	63703		,		20
Work Phone 6 E-mail 6 Website 6	Casey Garhart 08- 257-0658 achart etds. net applemorcis, org		FAXPhone During Event	(008-444-	5166	<u> </u>
Work Phone 60	t John Statt s, Z38-3847 ott @ src. Wisc. edu		Phone During Event	608-695-5	680	
Annual Event? Charitable Event? If Yes, name or	f charity to receive donations:				□ Yes □ Yes	DINo □ No
Estimated Attendar	ncen (not allowed after 11 p.m.) I	Houre	to (CERTIFI	CATE OF INSURANCE	MAY BE REC	QUIRED)
	₹a	iouis	_ 10		LI 162	NO.
EVENT CATEGO						
□ Run/Walk □ Other	Music/Concert	□ Festival	□ Rally	□ Parking (i.e.	, bagging r	neters)
LOCATION REQ	UESTED					
□ 30 on the Squar	note specific blocks below) e (a.k.a. top of 100 block of S Block Numbers:	☐ Podium/700-800 State Street ☐ Other (specific blocks/streets requested below)				
EVENT DATE(S)						
Date(s) of Event (including set-up and take-down) 4/24/14  Event Start Date(s)/Time(s) May 24, 2014 10:30 pm  Event End Date(s)/Time(s) May 24, 2014 12:30 pm			Rain Date(s)			
APPLICATION S	IGNATURE		rake-	Down Time, start to	streets re	opened
I/We waiv	e the 21-day decision require	ment.		-	(PLEASE	INITIAL)
Further, the person	ow indicates that you have re dygroup named in this applica Falsification of information or	tion will be respo	onsible for the conduct	t of the group and f	or the cond	dition of
	ules and regulations detailed oplicable ordinances, statues		olication instructions a	nd guidelines, Stre	et Use Per	mits
Signature	solle The	<u>X</u>		Date_ <u>/</u>	pril 21	, 2014