

APPLICATION FOR EVENT / ACTIVITY PERMIT
CITY OF JASPER, ALABAMA

Contact Information for Applicant and / or Organization

Name of Applicant (s): _____

Address: _____

City, State, Zip Code / _____

E-Mail Address: _____

Contact Number/s: _____ / _____ / _____

Requested Date/s of the Event / Activity: _____

Set-Up Time: _____ Time Event will begin: _____ / Time Event will end: _____

Requested location of activity: _____

Is this event sponsored, held by and/or presented by a Non- Profit organization? _____ Yes / No _____

If yes, state the organization Alabama Charter Number: _____

Organization requesting this Event/Activity Permit: _____

You **ARE REQUIRED** to include a copy of your 501(c) 3 to this application to be considered as a Legitimate Non-Profit

Name of contact person if applicant is an Organization: _____

Size of Event: (Estimated number of people on-site at one time / Information must be included)

() 0 to 150 () 151-300 () 301-500 () 501-750 () 750-1000

Signature: _____ / Date: _____

Submit completed application to:

Lisa Myers
Special Events Coordinator
City of Jasper, AL.
400 19TH Street West
P.O. Box 1589
Jasper, Al 35501
(205) 221-2100
(205) 385-7973 (Direct Line)
(205) 221-8522 (Fax)
events@jaspercitey.com

OTHER PAPERWORK MAY BE REQUIRED ON PRELIMINARY MEETING ON ALL DOWNTOWN AND/OR
PARK EVENTS PRIOR TO EVENT

NOTE: SEE EVENT ACTIVITY APPLICATION GUIDELINES FOR REFERENCE