

City of Taylor
EVENT PERMIT APPLICATION

Event Date: _____ Type of Event: _____

Event Location: _____

Event Hours: _____ Number of Participants: _____

Name: _____ Company: _____

Address: _____ Phone: _____

Cell Phone: _____ Email: _____

Will there be beer or wine: _____ If yes, serving _____ Selling _____
Will there be entertainment: _____ If yes, Describe: _____
Will there be sales of any type: _____ If yes, Describe: _____
Will you have portable restrooms: Yes _____ No _____
Will there be food: _____ Food Vendors/Caterers: _____
Additional Information: _____

Please give a brief description of your event and security provisions you have taken:

Additional Information: _____

(You may attach a second page with additional information if necessary)

Approved you will be notified of the applicable permit fees. Insurance Documentation may be required. The Golf, Parks & Recreation Department reserves the right to cancel the permit at any time without refund or reinstatement. The Department will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, martial status, disability or political beliefs. If you need help with reading, writing, hearing etc. under the American with the Disability Act, you may make your needs known to this department.

I certify that all information is provided about my event is complete and accurate. In signing I agree to be fully responsible for any/all under-aged consumption of alcohol.

Signature of Applicant _____ Date _____

-----For Office Use Only-----

Approved: _____ Denied: _____

Director Signature _____ Date _____