



**City of West Point**

**Application for Parade Permit**

Date of Application: \_\_\_\_\_

Sponsoring Agency: \_\_\_\_\_

Address of Sponsor: \_\_\_\_\_  
No. Street City State Zip Code

Telephone No.: \_\_\_\_\_  
Day Phone Number Night Phone Number

Time Parade to begin \_\_\_\_\_ Expected Ending Time \_\_\_\_\_

Anticipated number of:

Walkers: \_\_\_\_\_

Floats: \_\_\_\_\_

Vehicles: \_\_\_\_\_

Other: \_\_\_\_\_

Application must be received 10 working days prior to requested date of parade.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Chief of Police

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ROUTE (List each street or attach map)