



**APPLICATION FOR STREET BANNER**

**Please use blue or black ink & please PRINT.**

**DATE** \_\_\_\_\_

NAME OF ORGANIZATION: \_\_\_\_\_

DISPLAY PERIOD REQUESTED (1 WEEK MAXIMUM) \_\_\_\_\_

EXTENDED PERIOD REQUESTED (1 WEEK ADDITIONAL) \_\_\_\_\_

LOCATION REQUESTED \_\_\_\_\_

LEGEND TO APPEAR ON BANNER \_\_\_\_\_

WHAT IS THE ACTIVITY OF COMMUNITY INTEREST? (*noncommercial*) \_\_\_\_\_

\_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_

Street

City

State

Zip

PHONE NUMBER: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Legal Capacity If Representing An Organization

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**FOR OFFICE USE ONLY**

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APPROVED: \_\_\_\_\_

DISAPPROVED: \_\_\_\_\_

CITY CLERK: \_\_\_\_\_

DATE \_\_\_\_\_

COMMENTS: \_\_\_\_\_

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APPROVED: \_\_\_\_\_

DISAPPROVED: \_\_\_\_\_

MAYOR: \_\_\_\_\_

DATE \_\_\_\_\_

COMMENTS: \_\_\_\_\_