Applicant Group / Organization				
Recognized Society (Alberta Societies Act)	Υ	N		
Parade Group Main Contact				
Roll in Organization				
Phone #				
email				
Address				
Town/City & Province				
Postal Code				
Parade On-site Contact (if different than above):				
Roll in Organization				
Phone #				
Purpose of Parade				
Describe your Group / Organization				
Parade Date				
Parade Time	1			
Estimated Parade Duration				
Parade Route	Pre-Appro	oved:		Other
	If other, your parade request will need to be approved by council at their next regular monthly meeting.			
Does Your Parade Have a Charitable Component/Cause				
Are you requesting to close streets/traffic	Υ	N		
Estimated Number of Floats				
RCMP Signature				
Fire Services Signature				
Signature of Parade Applicant				