

JOHNNY APPLESEED METROPOLITAN PARK DISTRICT

SPECIAL USE PERMIT

FACILITY INFORMATION

Park/Facility requested:

Date (s) requested:

Time requested:

Explain purpose of requested use:

APPLICANT INFORMATION

Sponsor Name/Event Name:

Contact Name:

Address:

State:

Zip Code:

Phone:

E-mail:

Fax:

Cell Phone:

Work:

SPACE REQUESTING

Shelter (s)

Other:

ORGANIZATION CATERGORY

Check one of the following categories

501.3 c Non Profit
If 501.3c, non profit, list state
registration identification number

Government

Other Group or Individual
(non-business/commercial)

Business or
Individual

If other than "business" category is checked above, what approximate percentage of group members are residents of Allen County

%

