



**City of Le Sueur, MN
Parade Permit Application**

The undersigned applicant hereby makes application, pursuant to the City of Le Sueur's Code, Chapter 95 for a parade permit.

APPLICANT INFORMATION	
Organization Name:	Applicant Name:
Street Address:	City:
State:	Zip Code:
Phone:	Email:

PARADE INFORMATION	
Date of Parade:	Time of Parade (start and end time):
Location of Assembly:	
Parade Route:	
Purpose of Parade:	Number of Persons:
Number of Vehicles:	Number of Animals:

INSURANCE INFORMATION (MINIMUM \$1,000,000)	
Insurance Company:	Policy Amount:

I (we) certify that the foregoing facts and statements are true, correct and complete.

Signature of Applicant or Authorized Representative

Date

OFFICE USE ONLY	
Date Received:	Date Approved: