

**PARADE AND ASSEMBLAGE PERMIT**

**Date Submitted:** \_\_\_\_\_

**Purpose of Parade or Assemblage:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Name (Corporation or Company):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone No.:** \_\_\_\_\_

**Chairman or CEO of Organization:** \_\_\_\_\_

**Authorized Heads of Organization:**

**Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_ **Phone No.:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Person in Charge and Responsible for Conduct of Parade or Assemblage:**

**Name:** \_\_\_\_\_ **(Printed or Typed)**

**Name:** \_\_\_\_\_ **(Signature)**

**Address:** \_\_\_\_\_

**Telephone No.:** \_\_\_\_\_

**Date(s) Scheduled:** \_\_\_\_\_

**Starting Point (Street, Route No.):** \_\_\_\_\_

**Termination Point (Street, Route No.):** \_\_\_\_\_

**Estimated Time and Duration of Parade or Assemblage:** \_\_\_\_\_

**Approximate Number of Persons and/or Vehicles Constituting or Participating in Parade:** \_\_\_\_\_

**Parade Route (Diagram Requested):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

**PLEASE COMPLETE THIS FORM & RETURN TO:**

New Castle Police Department  
303 E. North Street  
New Castle, PA 16101-3687  
Attention: Traffic Department

Approved this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

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

\_\_\_\_\_  
Mayor