

TOWN OF FREEDOM SPECIAL EVENT PERMIT APPLICATION

Name and contact information of the Event Organizer

Name:	
Cell Phone:	_
Organizer EMail:	_
Address of Special Event:	
Type and description of the event including information about amplification:	ıt noise and any
Time of day (from set up to clean up):	
Estimated number of attendees:	
Is this a public or private event? (Clrcle one)	

Plan for parking, toilets, trash and access for emergency vehicles	
allowed. A Certificate of Liability and g, staging, etc.) must be provided as part	

enied	
date	
data	
date	