



City of Shepherdsville Parade Permit Application

Today's Date: _____

Parade Applicant Name: _____

Phone Number: (____) _____ Email: _____

Name of Organization requesting parade: _____

Date of Parade: _____ Start Time: _____ End Time: _____

Location of Assembly: _____

Time of Assembly: _____

Estimated number of people: _____

Estimated number of animals: _____

Estimated number of vehicles/floats: _____

Parade Route: _____

Office Use Only:

Notified by Police Department: _____

Notified by Fire Department: _____

Approved by Mayor: _____