

## **TOWN OF AMHERST**

## TOWN CLERK'S OFFICE

5583 MAIN STREET WILLIAMSVILLE, NEW YORK 14221 (716) 631-7021 FAX (716) 631-7152 www.amherst.ny.us Francina J. Spoth Town Clerk

Kathleen Cooper Deputy Town Clerk

Timothy Koller Deputy Town Clerk

## WALK/RUN/BIKE/PARADE EVENT APPLICATION

Date of application:	
Requesting Organization:	Name of Representative:
requesting organization.	rane of representative.
Address:	
Business phone:	Cell phone:
Email:	
Name of event:	
Event Date:	
Event times (include necessary setup/cleanup):	
YOU MUST ATTACH A MAP OF THE ROUTE TO THIS APPLICATION	
Please describe route:	
Est. number of participants:	
(Please include walkers/runners/bikers, volunteers, staff, etc. in this total)	
For groups with 1,000 or more participants, a safety/emergency plan must be submitted.	
*Please make sure you have approval from your Fire Chief prior to submitting application.	
Return this application to the Town Clerk's office with your \$25.00 non-refundable fee	
FOR INTERNAL USE ONLY Applic	ration Fee Paid on:
Approval received from: Central Fire Police Dep	e Alarm Emergency Services artment Youth & Recreation
Estimated Police costs:	
Amount due: Date received from applicant:	