

**City of Osage
Parade Permit**
(No Fee)

Date Applied: _____

Organization Requesting Permit: _____

Date of Parade: _____ Time of Parade: _____

Purpose of Parade: _____

Route: Start: _____

Finish: _____

Type of Units in Parade: _____

Estimated Length of Parade: _____

Responsible person(s) for Parade Conduct: _____

Permit Granted: Yes _____ No _____

Mayor/Date

Chief of Police/Date