



VILLAGE OF MANCHESTER

912 CITY ROAD P.O. BOX 485
MANCHESTER, MI 48158
(734) 428-7877 FAX: (734) 428-1877
WWW.VIL-MANCHESTER.ORG

LICENSE APPLICATION FOR CARNIVAL OR CIRCUS

Date: _____

APPLICANT'S IDENTIFICATION:

Name: _____ Telephone: _____

Address: _____

Sponsor's Name: _____

Liability Insurance Amount: _____ Name of Carrier: _____

DESCRIPTION OF ACTIVITY:

Location of Proposed Entertainment in the Village: _____

Date(s) of Activity: _____

APPLICANT'S STATEMENT:

I hereby state that the information I have provided in this application is true and correct to the best of my knowledge.

Signature: _____ Date: _____

For Office Use Only:

Fees \$50.00/day Date Paid: _____ Received by: _____

Approvals:

Chief of Police Signature: _____ Date: _____

Village Council: _____ Date: _____

Approval of location: _____