

**EAST PIKELAND TOWNSHIP
SPECIAL EVENT FORM**

EVENT TYPE:

[] Block Party [] Carnival / Circus [] Parade / Race
[] Other Event _____

EVENT SPONSOR: _____

EVENT DATE(S): _____ TIME: _____

EVENT LOCATION: _____

CONTACT PERSON: _____ PHONE: _____

SIGNATURE: _____ DATE: _____

COMPANY PROVIDING EVENT/ACTIVITIES (IF OTHER THAN EVENT SPONSOR):

ANTICIPATED ATTENDANCE / TURNOUT: _____

PARKING AND TRAFFIC CONTROL ARE THE RESPONSIBILITY OF THE EVENT SPONSOR.

ALL TEMPORARY SIGNS MUST BE REMOVED IMMEDIATELY FOLLOWING THE EVENT.

TOWNSHIP APPROVAL	
SIGNATURE: _____	DATE: _____
SPECIAL CONDITIONS OR RESTRICTIONS:	

