



Greg Champagne
Sheriff and
Ex-Officio Tax Collector

St. Charles Parish Sheriff's Office

Executive Department

260 Judge Edward Dufresne Parkway • Luling, LA 70070

Voice (985) 783-6237 • Fax (985) 783-1008

PARADE – 5K – BICYCLE – FUNRUN APPLICATION

1.) APPLICANT: _____

ADDRESS: _____

PHONE NO.: (____) _____

2.) PERSON REQUESTING PERMISSION TO CONDUCT
PARADE/5K/FunRun:

ADDRESS: _____

E-MAIL ADDRESS: _____

PHONE NO.: _____

3.) ORGANIZATION PARADE/5K/FunRun IS PROPOSED FOR:

ADDRESS OF HEADQUARTERS: _____

PHONE NO.: _____

NAME OF ORGANIZATION'S REPRESENTATIVE OR HEAD:

ADDRESS: _____

PHONE NO.: _____

4.) CHAIRMAN: _____

ADDRESS: _____

PHONE NO.: _____

5.) DATE OF PARADE/5K/FunRun: _____

6.) ROUTE OF PARADE/5K/FunRun: _____

7.) Will there be any road closures? If so, please describe. **PLEASE PROVIDE A MAP OF PARADE ROUTE WITH ROAD CLOSURES.**

8.) APPROXIMATE NUMBER OF PARTICIPATING:

PERSONS _____ ANIMALS: _____ VEHICLES _____

TYPE OF ANIMALS (IF ANY):

DESCRIPTION OF VEHICLES:

9.) HOURS OF PARADE/5K/FunRun: _____

10.) WILL THE PARADE/5K/FunRun OCCUPY **ALL OR ONLY** A PORTION OF THE WIDTH OF THE STREETS OR OTHER PUBLIC WAYS PROPOSED TO BE TRAVERSED?

11.) LOCATION (BY STREETS) OF ASSEMBLY AREA FOR PARADE/5K/FunRun:

12.) TIME UNITS WILL BEGIN TO ASSEMBLE FOR PARADE/5K/FunRun:

13.) INTERVAL OF SPACE **(IN FEET)** TO BE MAINTAINED BETWEEN PARADE UNITS: _____

14.) HAS THE PERSON PROPOSING TO HOLD THE PARADE/5K/FunRun **(IF OTHER THAN THE APPLICANT)** FILED WITH THE SHERIFF'S OFFICE A COMMUNICATION IN WRITING AUTHORIZING THE APPLICANT TO APPLY FOR THE PERMIT ON HIS BEHALF?

YES _____ NO _____

A minimum notification of twenty-four (24) hour is required for cancellations of details. Failure to notify the Detail Coordinator or Commander of Strategic Operations of cancellation will result in full invoice being due. When the event exceeds the end time listed above additional payment is due. The Detail Coordinator will contact the requestor for additional moneys owed. Additional moneys owed must be paid within seventy-two (72) hours.

IF EVENT IS CANCELLED OR DISBANDED FOR ANY REASON ON THE DAY OF THE EVENT, ALL MONEY IS DUE IN FULL AND NON-REFUNDABLE.

SIGNATURE OF APPLICANT: _____ DATE

APPLICATION APPROVED: _____
SIGNATURE DATE

APPLICATION REJECTED: _____
SIGNATURE DATE

cc: St. Charles Parish Council
St. Charles Parish President
District Fire Chief
Director of Public Works
St. Charles Hospital Emergency Medical Services
Environmental Health Systems

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**Please return to: ATTENTION: Cheryl Villere
Chief Rodney J. Madere, Jr.
St. Charles Parish Sheriff's Office
260 Judge Edward Dufresne Parkway
Luling, LA 70070**