

CITY OF BAY ST. LOUIS

SPECIAL EVENTS APPLICATION

Return application in person to City Hall, Mayor's Office, Second Floor or fax to (228) 466-5490

Organization Name The Arts, Hancock County

Organization Mailing Address 405 Blaize Avenue, BSL, MS 39520

Contact Person Gretchen Lederer

Telephone Numbers: Daytime 228-342-4521 Evening 908-328-4451

Application Date 7/17/24 Event Date 12/21/2025

Event Hours 6:00 - 7:00 pm (approx) Expected Attendance 30+

Event Description Winter Solstice Parade from 405 Blaize to 100 Man Hall, 303 Union Street

Event Location Desired

<input type="checkbox"/> McDonald Splash Pad (non-exclusive)	<input type="checkbox"/> Depot Grounds	<input type="checkbox"/> Harbor Park lot
<input type="checkbox"/> MLK Splash Pad (non-exclusive)	<input type="checkbox"/> Depot Stages	<input type="checkbox"/> Harbor Deck
<input type="checkbox"/> McDonald Park/Pavilion	<input type="checkbox"/> Shoo Fly	<input type="checkbox"/> Private Property
<input type="checkbox"/> MLK Park	<input type="checkbox"/> Sports Complex	<input type="checkbox"/> Al Smith Park
<input checked="" type="checkbox"/> City Street(s)	<input type="checkbox"/> Commagere Park	<input type="checkbox"/> VCJ Gym
	<input type="checkbox"/> Boys and Girls	

Name of Street(s) _____

NO PARKING ON THE GRASS AT CITY PARKS

What kind of alcohol, if any, will be served? ☐ Beer ☐ Wine ☐ Liquor

Will outdoor amplification be used, or will there be music or other loud noises? ☐ Yes ☒ No
NOISE ORDINANCE WILL BE IN EFFECT

Are other special needs being requested? ☐ Barricades ☐ Trash Barrels ☐ Electricity

If Barricades or Trash Barrels requested, please let us know how many and location. _____

Security required? ☐ Yes ☒ No

If Yes - security to be provided by: ☐ Applicant ☐ City

Other _____

I understand that additional information may be requested or special permits required based on the nature of the stated event activity. I also understand that my request may require action by the City Council. If so, I will be notified of the meeting time and place.

[Signature]
Signature of Applicant

Application received by: _____ Date: _____

Approved [Signature] Disapproved _____ Date 8/19/25

Comments: _____