

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 Narrow Path Ministries

Organization Mailing Address 601 Bouslog St. Bay St. Louis 39520

Contact Person Joshua Hutchison

Telephone Numbers: Daytime [REDACTED] Evening [REDACTED]

Application Date 5-27-26 Event Date 8-22-26

Event Hours 11-6 pm Expected Attendance 300-500

Event Description community outreach / concert (completely free) music, free food, resources, games, Bounce Houses

- 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 checked="" 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 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) \_\_\_\_\_

*Handwritten:* No DRIVING NO PARKING ON THE GRASS AT CITY PARKS

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

*Handwritten:* NO Alcohol at all.

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 *Handwritten: (for sound) equipment and Bounce House*

If Barricades or Trash Barrels requested, please let us know how many and location.  
*Handwritten:* we will provide trash cans and portable bathrooms

Security required?  Yes  No

If Yes - security to be provided by:  Applicant  City

Other we will provide our own Security team

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.

*Handwritten Signature*  
Signature of Applicant

Application received by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved *Handwritten Signature* \_\_\_\_\_ Disapproved \_\_\_\_\_ Date 6/11/24

Comments: \_\_\_\_\_