



REQUEST FOR AMPLIFIED MUSIC

City of Kaukauna
144 W Second St
Kaukauna, WI 54130

Applicant Information

Name: Michael Weaver Date of Birth: 6-14-47
Address: 516 E. 14th Street, Kaukauna Phone number: 920-470-4674
Organization Name, if applicable: VFW Post 3319 - Kaukauna
Email address: skipatroldoc@gmail.com

Event Information

Name of Event: Memorial Day Ceremony
Event location (s): Kaukauna Ring of Honor - 420 Lawe Street
Date of Event: 5/29/2023
Event Start time- End time:
11:00 - Noon
Number of people attending: 200 - 300

This application will be formally reviewed by the Health and Recreation Committee.
Please allow up to 3 weeks for a response. If you do not hear from City staff: request is approved.

For questions: russove@kaukauna-wi.org

