

## REQUEST FOR AMPLIFIED MUSIC

City of Kaukauna 144 W Second St Kaukauna, WI 54130

## **Applicant Information**

| Name:Debra Schultz Date of Birth: 6/20/1964_  |            |  |  |  |  |  |
|---|------------|--|--|--|--|--|
| Address: _W422 County Road CE, Kaukauna, WI 54130 Phone number: 920-540-3117  |            |  |  |  |  |  |
| Organization Name, if applicable: _Peace United Methodist Church  |            |  |  |  |  |  |
| Email address:debra.hartjes@sbcglobal.net   |            |  |  |  |  |  |
| Event Information   |            |  |  |  |  |  |
| Name of Event: _Church Service and Family Picnic  |            |  |  |  |  |  |
| Event location (s):Riverside Park Date of Event: _7/9/2023  | <u>'</u> _ |  |  |  |  |  |
| Event Start time- End time:8:00am-11:00am   | •          |  |  |  |  |  |
| Number of people attending:40   |            |  |  |  |  |  |
|   |            |  |  |  |  |  |
| 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 i approved. | S          |  |  |  |  |  |
| For questions: tvosters@kaukauna-wi.org   |            |  |  |  |  |  |



