## Foley

## APPLICATION TO USE CITY PARK

Applications must be received at least three weeks prior to the event.

| Park Requesting: Foley Kide Park                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Name: Accord Performance materials                                                                                                                  |
| Address: 518 3. Pay St. Foley, AL 310535                                                                                                            |
| Phone No: 251-952-1729 Email: Buttor @cecerdmoteriale C                                                                                             |
| Type of Event: Accord Cares Community Day                                                                                                           |
| Description of all activities/facilities involved (include whether food or beverages will be served, tents erected, music, power requirement, etc.) |
| Food / Beverages, Kido Games, Face painting, House                                                                                                  |
| FOOD I BEVEROGES, Kids Games Face pointing, House we are hoping to have whacked out weiner food track                                               |
| we will be calleding can food items to donote to loca                                                                                               |
| food banks.                                                                                                                                         |
| Date of Event: June 1, 2019                                                                                                                         |
| Time of Event: From 8:3000 To: 3:00pm (including set up and clean up)                                                                               |
| Maximum Number of Persons: Open to Community                                                                                                        |
| Signature of Applicant: Bould Date: 4194119                                                                                                         |