

**Town of Foxborough
40 South Street
Foxborough, MA 02035
(508) 543-1219**

**PUBLIC EVENT APPLICATION
(PARADE, ROAD RACE, PERFORMANCE OR ASSEMBLY)**

Date: _____

Applicant Name: _____

Applicant's Organization: _____

Contact Name: _____

Address: _____ Phone #: _____

Clearly describe your event: *(Attach letter if more space required)*

Date(s) Including Start and End Times: _____

Description of Proposed Activity (ies)

For Parades, Marches: Assembly Location, Route, Dispersal Location: _____

Attach copy of route

Expected Number and Type of Participants (persons, animals, vehicles): _____

Audience/Spectator Estimate: _____

Describe all crowd control, traffic control, or other safety measures: _____

Insurance Information: _____

Issuing Company: _____

Public Liability Coverage Limit: _____

Requirements:

- You may be required to obtain a police detail or other additional municipal services. Costs for these are responsibility of the applicant and prepayment, a deposit, or surety for payment may be required.
- You are required to provide us with Certificate of Insurance evidencing minimum public liability coverage of \$2,000,000 for the event and showing the Town of Foxborough as an additional insured.

NOTE: Approval of permit is based upon Board of Selectmen's determination that the event will not pose a risk of endangering public health, safety or welfare, based upon their application of public safety criteria.

Applicant Signature: _____ Title: _____

Print Name

COMMENTS: FOR TOWN USE ONLY

Police/Safety Officer: _____

Approval Yes No

Conditions: _____

BOARD OF SELECTMEN

