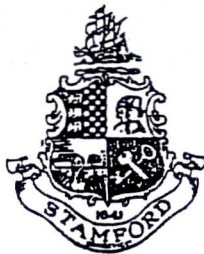


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CITY OF STAMFORD
CASHIERING & PERMITTING DIVISION
888 WASHINGTON BOULEVARD
STAMFORD, CT 06904-2152

STAMFORD SCHOOL SPONSORED EVENT

DATE OF APPLICATION: _____ DATE OF EVENT: _____

SCHOOL: _____

ROOMS RESERVED: _____

EVENT START TIME: _____ EVENT END TIME: _____

NUMBER OF PARTICIPANTS ADULTS: _____ CHILDREN: _____

APPLICANT NAME: _____

TELEPHONE(S): _____

EVENT DESCRIPTION: _____

ADDITIONAL REQUIREMENTS: _____

PRINCIPAL SIGNATURE: _____

Form to be submitted to the Cashiering & Permitting Division Office
1st. floor Government Center.