## **APPLICATION FOR BUSKING PERMIT**

## PART 1 – TO BE COMPLETED BY APPLICANT

Applicant's N	ame:			Postal Cod	le:
Applicant's A	ddress:				
Date of Birth		// ONTH DAY YE	 EAR		
Please Note: Pa		ensent is required for an		age of sixteen (16)	
riease Note. Ta	Tental of guardian co	misent is required for an	y person(s) under the	age of sixteen (10).	
Tolophono					
Telephone:	Reside	ence	Business:		Cellular No.
E-mail:					
I/we are reque	esting a Busking	Permit for a:			
-		By-law No. 3675,	Schedule 'F' for	associated fees	1
One Day P	_				•
☐ One Day I	Gilliit	Date and Till	Date and Time:		(i ee associate
☐ Multiple Da	ıy Permit (3 day li	imit) Dates and Ti	Dates and Times:		(Fee associated
One Week	Permit (5 – 7 c	days) Date to begir	Date to begin:		(Fee associated
	n Downit	Datas and Ti	Dates and Times:		/Fac associate
Half Seaso (six (6) week	n Permit Kperiod preceding		mes:		_ (Fee associated
	eek period after Ju				
Type of Perfor	mance (please	check all that app	ly):		
Musical Per	formance	☐ Storytellir	ng Poetry	Street The	atre
Comedy		☐ Slight-of-I	☐ Slight-of-Hand Magic ☐ Juggling		
			ionia magic		
		eapons permitted	1		
Rubber/plastic	replica's require	pre-approval by Dir	ector		
Busker(s) Info	rmation				
				Damant an O	andian Canada
Name	Address		Date of Birth	Parent or Guardian Consent (Required if person(s) is under	
		Telephone #		the age of sixteen (16).	
				Print Name of	
				Parent or	Guardian
				Guardian	Phone number
Parental Cor					
		required for each b			
the Town of F		ess) hereby conser	it to my chila (nan	ie) to busk in the	permitted busking
		Perth provides no s	supervision for bus	skers and that all I	buskers must
		of Perth's Busking E			
Signature:					
Print Name:					
Dated:					
I .					

## Insurance Applicant Signature

Telephone: (613) 267-3311.

The permit holder indemnifies Council against all suits, proceedings, judgements, claims, demands, costs, expenses, losses or damages for which Council becomes or may become liable in relation to the death or injury to any person or the damage to any property in connection with the busker activity as authorized by the permit whosoever arising, except to the extent that Council is negligent.

Declaration
I/we declare that I am the Applicant; and that all information in this Application is true and correct. I hereby CERTIFY THAT I have read and accept this Application, the Busking By-law and Guidelines and the terms and conditions therein and; the Fees and Charges By-law No. 3675, Schedule 'E'.
I/we agree to comply with all Permit conditions, local laws and all relevant legislation. I/we will ensure that the Permit is not transferred or assigned to another party. I acknowledge that failure to comply with these conditions will result in cancellation of the Permit.
Please Note Special Condition/Objections if applicable, will form part of the Busking Permit:
The Applicant must have a copy of the Busking Permit on them at all times when performing.
Signature:
Print Name:
Dated:
Contact
Please forward the completed Application, any supporting documents along with appropriate fee (if

required) to: Director of Development and Protective Services, 80 Gore St. E, Perth, ON, K7H 1H9,

(Attach any additional comments to Application)	
Date (Permit Approved / Denied)	Director of Development and Protective Services (or Designate)
CERTIFY that I have reviewed the Applicati	ion and have:
□ No Objection	☐ An Objection
☐ Approval of Perth Farmers Market is att	ached  Not required
Special Condition/Objections if applicable, v	which will form part of the Busking Permit:
Comments:	
(Attach any additional comments to Application)	
( indentity additional commence to supplication)	
( ,	
	Director of Development and Protective Services (or Designate)
Date (Permit Approved / Denied)	Director of Development and Protective Services (or Designate)
	Director of Development and Protective Services (or Designate)  Director of Community Services (or Designate)

amended, and will be used to determine eligibility to issue a Busking Permit within the Town of Perth.