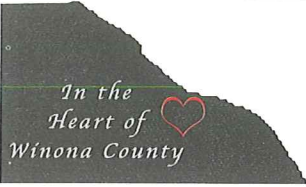


CITY OF LEWISTON

Lewiston City Hall



75 Rice Street • P.O. Box 129 • Lewiston, MN 55952
Phone (507) 523-2257 • Fax (507) 523-2306

Dance Permit Application

Date: _____

Applicant Name: _____

Event Location: _____

Event Address: _____

Single Event (Return to City Clerk with \$25.00 Fee)

Date of Event: _____

Event Time: _____ To _____

Performer: _____

Event Security By: _____

Annual Permit Request (Requires City Council Approval and \$250.00)

Dates: _____ To _____

Events Security By: _____

Applicant's Signature: _____

City Clerk's Signature: _____

***Must provide proof of insurance for the event or permit length.**