CITY OF NORTON SHORES ROSS PARK DISC GOLF APPLICATION

Name/Organization		
Address		Telephone #
		Cell phone #
Email:		
Date of Event:		
Time of Event:		
Estimated number of particip	ants:	
		the upcoming event you are applying for (how representatives from your organization will
The fee for disc golf facility rewillingness of representative		lependent upon the size of event as well as ty clean.
Amount Due:		
I,	complete. I unde	y that the facts set forth in this application for a Ross erstand that if the permit is issued, false statements or ng said permit.
	Date	Name/Organization