

REQUEST TO HOLD BLOCK PARTY

Person Making Request: _____

Organization Name: _____

Street Address: _____ ZIP: _____

Home Phone Number: _____ Business Phone Number: _____

Date of Block Party: _____ Time of Block Party: From: _____ To: _____

Block **and** Street to be Blocked Off: _____
(Example: 2000 - 2600 Lake Road)

STREET NEEDS TO BE BLOCKED OFF AT WHAT TIME? _____

Number of Barricades Requested: _____ Deliver Barricades to: _____

at: _____

*(Person requesting Block Party is responsible for barricades. Barricades will be delivered and picked up as stated below.
PLEASE NOTE: barricades are delivered on Fridays and picked up on Mondays.)*

Barricade Delivery Date: _____ Barricade Pickup Date: _____

RULES AND REGULATIONS FOR BLOCK PARTY

- 1) *Limited to (4) four hours.*
- 2) *No Alcoholic Beverages Allowed.*
- 3) *No Bus Routes.*
- 4) *No Loud Music or Noise.*
- 5) *You must contact everyone in the area where the street is to be blocked off, and they must be in agreement by signing the attached sheet.*
- 6) *The Block Party Request must be in **TWO** weeks in advance.*
- 7) *The Ranking Police Patrol Supervisor has the right to revoke the Block Party if there are violations of permit requirements.*
- 8) **Return this form to:** *Linda Harrison, Recreation & Parks Department, PO Box 2511, Winston-Salem, NC 27102.*

Signature of Person Making Request and in charge of the Block Party

APPROVED: _____

Timothy A. Grant
Recreation & Parks Director

APPROVED: _____

Patricia D. Norris
Police Chief



