

## PROMOTIONAL BANNER PROGRAM APPLICATION FORM

NAME OF ORGANIZATION:	
TYPE OF ORGANIZATION:	
	Zip:
	PHONE:
ADDRESS (if different from organization's):	
NAME OF EVENT:	
TYPE OF EVENT:	
DATES OF EVENT:	
INSTALLATION DATE:	REMOVAL DATE:
TOTAL NUMBER OF BANNERS:	
PRIVATE ENTITY TO HANG BANNERS:	
PREFERRED LOCATION:	



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The undersigned states that he/she has been provided with a PROMOTIONAL BANNER PROGRAM POLICY STATEMENT, and HOLD HARMLESS AND INDEMNIFICATION AGREEMENT, and that he/she has read, understands, and agrees to abide by the Regulations contained in them.

Authorized Signature	Date			
Please return application to:	Downtown Dayton Partnership 10 West Second Street, Suite 611 Dayton, OH 45423 Phone: 224-1518 Fax: 224-3602			
(For I	DDP Use Only)			
Date Arrived:	Reason:			
Approve:	No. of Banners:			
ength of Exposure:toto				