

**CITY OF MARENGO
COMMUNITY EVENT SIGN APPLICATION**

Organization: _____

Address: _____ Telephone: _____

Applicant: _____

Address: _____ Telephone: _____

Requested Dates Of Sign Use:

Week 1: _____

Week 2: _____

Date of event: _____

Please place requested text in the area below. Use one letter per box and one blank square between words.

Received: _____ By _____ Date _____ For the City of Marengo

GENERAL RULES:

1. A fee of \$10.00 per message per week will be charged for the use of the sign.
2. The sign is scheduled on a first come - first served basis.
3. All applications must be completely filled out.
4. The sign will not be scheduled, nor will any application be accepted more than one hundred eighty (180) days in advance.
5. Any request for cancellation must be received at least fifteen (15) days before the scheduled appearance in order to receive a refund

More detailed rules and regulation are available on request from the Marengo City Clerk s office, 132 E. Prairie Street, Marengo, Illinois. Phone: (815) 568-7112.

In the event the City of Marengo incurs any liability whatsoever arising out of this application and agreement, the undersigned agrees to fully indemnify and hold the City entirely harmless therefore, and acknowledges that the City would not allow this use but for the acknowledgment, release, waiver, and indemnification contained herein.

Signature _____
Date