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WASHINGTON TOWNSHIP MUNICIPAL COMPLEX | ADMINISTRATIVE OFFICES
11798 BUCHANAN TRAIL EAST, WAYNESBORO, PA 17268
Phone: 717-762-3128 | Fax: 717-762-1775 www.washtwp-franklin.org

Application for OUTDOOR AMUSEMENT

Non-Profit: YES _____ or NO _____

This application must be filed with Washington Township a minimum of 60 days in advance of the event.

Application is hereby made for an outdoor performance license as required by the Township of Washington, Franklin County, Pennsylvania, in accordance with Chapter 109 of the Code of Washington Township, and any amendments thereto, to obtain an outdoor amusement license for the following event:

Name & address of the person or organization sponsoring the event: _____

Type of outdoor amusement proposed: _____

Dates on which outdoor amusement is to be conducted: _____

Hours during which the outdoor amusement to be conducted on dates indicated above: _____

Site / Location on which the Outdoor Amusement to be conducted: _____

Anticipated attendance for each date indicated above: _____

Outdoor amusements conducted for non-profit must provide to Washington Township certification of public liability insurance for the event and certified copies of any county or state licenses required.

If Non-Profit; Charity to which funds will be donated: _____

A copy of the report of the amount of funds donated to charity, and accounting for all income gained from the event, must be provided to Washington Township within 7 days of the completion of the event.

ONCE VALIDATED, THIS LICENSE IS ONLY FOR THE TIMES REQUESTED ABOVE.

A sketch plan of the proposed outdoor performance must be submitted with this application, showing the proposed location of the amusement, parking and sanitation facilities provided.

I am applying for an Outdoor Amusement License as described above. I have read and understand the requirements of Chapter 109 of the Code of Washington Township. I hereby certify that all profits will be donated in their entirety to the charity listed above.

Date: _____ Applicant Signature: _____

FEE PAID & DATE: _____