



CITY OF GAINESVILLE PROCLAMATION APPLICATION FORM

Return Completed Proclamation Application to:
 Terri Kapetanis City Manager's Office via **Facsimile: 770-535-6896**
Mail: P O Box 2496 Gainesville, Georgia 30503 **Email: tkapetanis@gainesville.org**

APPLICANT INFORMATION

DATE: _____

ORGANIZATION NAME:	
APPLICANT NAME:	
ADDRESS:	
TELEPHONE NUMBER:	FACSIMILE:
EMAIL ADDRESS:	
CONTACT PERSON:	
CONTACT TELEPHONE:	FACSIMILE:
CONTACT EMAIL ADDRESS:	

PRESENTATION INFORMATION (check one)

Planned Event Council Meeting Schedule Pickup Mail

Are you requesting a joint City/County Proclamation – ***Applicant is responsible for contacting Hall County Administration and requesting their attendance at the event, if desired.***

PLANNED EVENT INFORMATION

INVITEE(s) / PROCLAMATION PRESENTER:	
NAME OF VENUE/EVENT LOCATION:	
EVENT ADDRESS:	
CONTACT PERSON AT EVENT:	
EVENT START TIME:	EVENT END TIME:
ESTIMATED TIME PROCLAMATION IS TO BE PRESENTED:	
IS CITY REPRESENTATIVE TO ATTEND ENTIRE EVENT OR PRESENTATION ONLY:	

COUNCIL MEETING

REQUEST FOR PROCLAMATION PRESENTATION AT THE _____ (date) COUNCIL MEETING
Please provide a list of names and respective titles of the individuals who will be attending the proclamation presentation on behalf of your organization.

A minimum of 2 weeks advanced notice is required for presentations at a Council Meeting

FACTS TO BE CONSIDERED FOR USE IN PROCLAMATION:

Please attach a brochure about your organization along with other official literature describing your organization and its primary focus

The Gainesville City Manager's office reserves the right to use submitted facts as deemed appropriate and may request additional information when necessary. Supplemental information may be attached.