STREET ENTERTAINERS APPLICATION

This application is for a permit under the Shire of Northam Activities on Thoroughfares and Public Places and Trading Local Law 2008 to perform in a public place.

(NB: Permit is not required for public speaking)

APPLICANT DETAILS

Name Applicant: ________________________________________________________________
Address Applicant: ________________________________________________________________
Phone Contact Details: _____________________________________________________________
Email Details: ________________________________________________________________

PROPOSED ENTERTAINMENT DETAILS

Type of Entertainment: (eg: musical instrument type, sing, mime, dance, aerobatic. Public speaking does not require a permit)
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Amplification Device? No Yes Type ____________________________________________
(Note: Amplification devices permitted only in Soundshell & Mall)

LOCATION, DATE & TIMES

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<th>Location</th>
<th>Date</th>
<th>Start</th>
<th>Finish</th>
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INSURANCE

Copy of Certificate of Currency Public Liability attached: ☐

RULES

- A permit is valid only for the dates, times and places approved
- Permit may be cancelled if the Shire determines the performance is constituting a nuisance
- Performer is not permitted to:
  - Use abusive or offensive language
  - Use dangerous items in a performance (such as fire or knives)
  - Disrupt retailers
  - Display items for sale or distribute flyers
**Lodgement and Payment of Application**

**PAY IN PERSON**
At Shire of Northam Council
Office, 395 Fitzgerald Street,
Northam during hours 8:30am to
4:30pm Monday to Friday.

**PAY BY MAIL**
Send completed form together
with your cheque or money order;
or if paying by credit card
complete the section provided on
the right and send to Shire of
Northam, PO Box 613, Northam,
WA 6401.

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**PLEASE COMPLETE THIS SECTION IF PAYING BY CREDIT CARD**

Name as shown on Card ............................................................................................

Card Holder Address .................................................................................................

....................................................... Signature ......................................................

Bankcard | Mastercard | Visa Card

Amount $________________________ Expiry Date _______/


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