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# Banner Placement Application Over G Street at 9<sup>th</sup> Street

CITY OF ARCATA RECREATION DIVISION 736 F STREET, ARCATA, CA 95521 MONDAY – FRIDAY 9 A.M. – 5P.M.

(707) 822-7091 PHONE

(707) 825-2118 FAX

EMAIL: rec@cityofarcata.org

Date of Event: \_\_\_\_\_

**Banner Placement Fee: \$418.75**

Event/Organization Name: \_\_\_\_\_

Representative Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email: \_\_\_\_\_

- I understand that banners for City of Arcata sponsored events and City organizations will take precedence over non-City of Arcata requests.
- I understand that all Banner Placement Applications will be handled on a first-come, first-served basis.
- I understand all banners must comply with the dimension requirements shown on the reverse side of this page.
- I understand that banners are to be delivered to the Recreation office by the Friday prior to the requested placement date.
- I understand that banners will generally be placed for a minimum of one week and a maximum of two weeks.
- I understand that the actual dates of banner placement may be different than those requested due to weather, availability of City staff to place the banner, or other possible requests for the same time period.
- I understand if a banner reservation is cancelled within 6 weeks of the Requested Banner Placement Date, the City will refund half of the collected fees.
- I understand that banners are to be picked up from the Recreation office once notified of its removal or storage fees may apply.

<b>Requested Banner Placement Dates:</b>	
From _____	To _____

Signature of Applicant/Representative: \_\_\_\_\_ Date: \_\_\_\_\_

DEPOSIT: _____	RECEIPT #(s): _____	DATE PAID: _____	Must be Received By: _____
Fees: _____	RECEIPT #(s): _____	DATE PAID: _____	

**Return Deposit To:**

Name \_\_\_\_\_ Address \_\_\_\_\_  
(Include city & zip code)

