



# City of Lorain

## BANNER REQUEST APPLICATION

Application Submittal Date \_\_\_\_\_

### SPECIAL EVENT INFORMATION

Event Contact's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Organization's Name \_\_\_\_\_

Address \_\_\_\_\_ Email Address (REQUIRED) \_\_\_\_\_

Name/Description of Event \_\_\_\_\_ Event Date \_\_\_\_\_

### BANNER INFORMATION

Banner Location(s) Requested?    **West Erie/Broadway** \_\_\_\_\_    **South Lorain/Grove Avenue** \_\_\_\_\_

Will you be providing any artwork? **Yes / No**

If providing, is artwork attached:    **Yes / No**    If emailing, confirm that you'll send within 48 hours: **Yes / No**

Please **PRINT CLEARLY**. Provide wording for the sign, event date, time, organization name and any other details to be placed on the 4' x 8' banner to be made by the City of Lorain Sign Shop.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Up to two banner proofs will be provided "prior to" printing the banner.  
Payment for additional proof requests in the amount of \$25.00 each must be paid in full prior to further changes.**

<i>Application / Banner Information For Office Use Only</i>	
Date of payment _____	Amount received _____
Banner location availability confirmed by _____	Request approved by _____
First proof emailed _____    Second proof emailed _____	Organizer's emailed approval dated _____
Date banner to be hung _____	Date banner to be removed _____