

CAMBRIDGE ARTS | STREET PERFORMERS

APPLICATION FOR PERMIT

Date: _____

Name: _____

Stage Name: _____

Group Name: _____ No. in Grp. _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip: _____

E-mail Address: _____

Telephone Number, Day: _____ Evening: _____

Over 18 years of age?: (circle one) Y N If no, is there a legal guardian present and co-signed below?: _____

Have you previously had Street Performer's Permit in Cambridge, MA? (circle one) Y N
If no, what prompted you to get one today? Fee Removal _____ Just Learned About It _____ Other _____

TYPE OF PERFORMANCE

MUSIC: _____ DANCE: _____ THEATRE: _____ VISUAL ARTS: _____ VARIETY: _____

ALL PERFORMERS, Please describe performance: _____

If you are a musician please specify the style of music and instrumentation:

Number of amplifiers used if any _____

The applicant, by signing this application indicates that the above performer has received, read and understands the regulations governing issuance of this Permit in the City of Cambridge (Municipal Code Section 12.16.160) as set forth in Ordinance 1403 (11/29/18) and agrees to adhere to the regulations set forth within.

*Permits are issued for the calendar year or the unexpired portion thereof. Applications **MUST** be submitted in person to the Cambridge Arts Council located at 344 Broadway, 2nd fl, Cambridge MA. Mailed-in applications will not be processed. Valid Photo ID is required at time of application. All outstanding noise citations from the previous year must be paid before permit can be issued. Applicants under 18 must have a legal guardian present.*

Performer/Applicant Signature: _____ Date: _____

FOR OFFICE USE ONLY

DATE ISSUED: _____ BY: _____ PERMIT # _____