



Notice of Intention to Hold an Assembly/Procession using Council Facilities

PEACEFUL ASSEMBLY ACT 1992

NOTES: *Permission must be obtained from the Queensland Police Service if this assembly/procession will use a road or footway. If applicable, include an event program and map showing the proposed pedestrian malls, parkland, roads and footways to be used.*

1 What is the name of the organiser?

Full name *Please print*

Title
 Mr Ms Mrs Other

First name

Surname/Family name

2 What are the contact details of the organiser?

Phone number Fax number

Mobile number

E-mail

3 What are the address details of the organiser?

Address

Number Street

Suburb Postcode

Address for service of notices *If different to the above*

Number Street

Suburb Postcode

4 What is the name of the assembly/procession event?

5 What are the expected number of participants at the event?

6 What is the date of the event?

7 What are the start and end times of the event?

Start time : End time :

8 What is the exact starting location point of the event?

9 What is the exact finishing location point of the event?

10 What are the proposed pedestrian malls, parkland, roads and footways to be used?

11 Is the event a procession?

Yes *Give details* No *Go to 12*

Describe the proposed route of the procession, places at which the procession will stop and the length of time the procession will remain at each place

12 What is the purpose of the event?

13 Is it proposed that there will be placards and/or banners used during the event? **NOTE: Hard placards and/or banners will not be permitted.**

Yes Give details

No Go to 14

14 Is it proposed that there will be sound amplification equipment used during the event?

Yes Give details

No Go to 15

15 What is the organiser's contact during the event?

Name

Phone/Mobile number

16 What are the organiser's additional contacts during the event?

Name

Phone/Mobile number

Name

Phone/Mobile number

17 What public liability insurance does the organiser propose for the event?

18 Applicant's authorisation

I declare that the information and particulars set out in this notice are true and correct.

Signature

Date

Return completed form to:

**Divisional Manager
Divisional Manager's Office
City Administration and Governance
Brisbane City Council
GPO Box 1434
BRISBANE QLD 4001**

OR email NOI@brisbane.qld.gov.au

OR fax 07 3334 0043