



601-856-7060
2023 Main St
Madison, MS 39110

Please email completed form to ahoops@madisonthecity.com

BANNER APPLICATION

Applicant Information

Organization Name:

Owner/Applicant Name:

Address :

City

State

Zip

Phone Number: E-Mail:

Start Date: End Date:

Only 2 weeks are permitted per event:

Type of Banner:

Banners must be secure, pulled tightly and maintained for duration. Madison the City reserves the right to remove banners that are sagging or have fallen.

Location of Banner (choice of one only)

MADISON COMMUNITY
CENTER, OLD CANTON RD

CRAWFORD FARMS,
ROUNDAABOUT

☐

Must use poles provided

☐

Must use poles provided

Submit the following information along with the application:

-Picture of Banner

-Banner Dimensions _____

Applicant Signature _____ Date: _____

City of Madison Rep: _____ Date: _____

Approved ☐

Not Approved with Reason: ☐