



APPLICATION FOR SPECIAL USE PERMIT SHORT FORM



Thomas Stone NHS
C/O George Washington Birthplace NM
1732 Popes Creek Road
Colonial Beach, VA 22443
804-224-1732 x 240

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information.** A nonrefundable processing fee of \$50 must accompany this application unless the requested use is an exercise of a First Amendment right. You must allow sufficient time for the park to process your request; check with the park for guidelines. You will be notified of the status of the application and the necessary steps to secure your final permit. Your permit may require the payment of cost recovery charges and proof of liability insurance naming the United States of America an additional insured.

Applicant Name		Telephone Number	
Organization		Cell Phone Number	
Social Security Number or Tax ID number		Fax Number	
Email Address			
Street Address			
City	State	Zip Code	Country
Proposed Activity			
Preferred Date	Preferred Location	Preferred Time	
Alternate Date(s)*	Alternate Location(s)*	Alternate Time(s)*	
* Alternatives will be considered if first choice is not available.			
Maximum Number of Participants		Maximum Number of Vehicles	
List of Equipment			
Individual in charge of activity onsite who is authorized to make decisions related to the permitted activity:			Cell Phone Number
Have you visited the requested area? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is this an exercise of a First Amendment rights? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Signature	Date
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