



City of Toronto
DEPARTMENT OF PARKS AND RECREATION
Permit Section
Main Floor West, City Hall
Toronto, Ontario M5H 2N2
392-7291

APPLICATION NUMBER

0439

APPLICATION Special Event in a City Park

Name of Organization: AFRICAN NATIONAL CONGRESS
Event: "MANDELA FREEDOM DAY"
Contact person: ALEEN JEEIA
Address: 292 A Danforth Ave, Toronto Postal code: M4K 1W6
Telephone: Business - 461-4255 ext. - — Residence - —

Name of park requested (if name is not known specify area of City desired):

QUEEN'S PARK - NORTH OF WEELEY ST.

Name(s) of alternate park(s):

NONE

Location in park requested:

WHOLE PARK

Alternate location in park:

| DATE(S) REQUIRED | | ALTERNATE DATE(S) | |
|------------------|----|-------------------|----|
| FROM | TO | FROM | TO |
| 16 July 1989 | — | — | — |
| | | | |
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| HOURS REQUIRED | | ALTERNATE HOURS | |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| FROM | TO | FROM | TO |
| 9 a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| <input type="checkbox"/> p.m. | 9 p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. |
| <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. |
| <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. |
| <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. |

Anticipated attendance: 3,000

Please provide an outline of the activities you plan to present in the park. (Attach an additional sheet if more space is required.)

- BEER GARDEN
- MUSIC ENTERTAINMENT
- SPEAKERS
- INFORMATION STALLS
- FOOD STALLS

Will food and/or beverages be sold?

☒ Yes ☐ No

Will alcoholic beverages be sold?

☒ Yes ☐ No

Will any goods or merchandise be sold?

☒ Yes ☐ No

If yes, please specify the items to be sold and the price to be charged for them

BEER - \$2.75

SOFT DRINKS \$1.00

Promotional materials at various prices

ETHNIC FOODS

Will donations in any form be solicited?

☒ Yes ☐ No

If yes, specify means of solicitation:

BY MEANS OF A COLLECTION BOXES WILL BE SENT
AROUND TO COLLECT DONATIONS

If any items are to be sold or donations accepted, for what purpose are these proceeds being raised?

TO OFFSET THE COSTS OF THE EVENT. EXCESS
FUNDS WILL BE UTILISED BY THE ORGANISATION TO
FIGHT THE SYSTEM OF APARTHEID IN SOUTH AFRICA BY PROVIDING
CANADIANS WITH INFORMATION & INFORMATIONAL MATERIALS ETC.

Do you plan to erect any tent(s) or marquee(s) in the park?

☐ Yes ☒ No

If yes, for what purpose?

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.....

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What are the dimensions of the structure(s)?

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.....

.....

Where in the park will the structure(s) be placed?

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.....

.....

Does your organization plan to make use of any device or mechanism to amplify sound?

☒ Yes ☐ No

If yes, for what purpose?

SO THAT THE SPEAKERS AT THE EVENT COULD BE HEARD
AND FOR THE MUSICAL ENTERTAINMENT.

DATE(S) REQUIRED

| FROM | TO |
|--------------|-------|
| JUN 16, 1989 | — |
| | |
| | |
| | |

HOURS REQUIRED

| FROM | TO |
|----------------------------------|---------------------------------|
| <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| 12 <input type="checkbox"/> p.m. | 9 <input type="checkbox"/> p.m. |
| <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. |
| <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. |
| <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. |

Will your organization require access to electrical power?

☒ Yes ☐ No

If yes, what ampage/power is required? NOT CERTAIN YET

For what purpose?

FOR AMPLIFICATION

Depending on availability the Department will provide the following items: picnic tables, waste receptacles, snow fencing and platforms. Snow fencing can be used for displays or to enclose beer gardens. The platform sections measure 4' x 8' and are simply placed side by side to form a stage. Any other items, such as sound systems, folding tables or chairs, must be provided by the applicant.

If any of the above items are required please complete this section:

☒ Picnic tables: number

☒ Snow fencing: length required

☒ Waste receptacles: number

☐ Platform sections: number

Is this a Non-Profit Organization?

☒ Yes ☐ No

If yes, does it have a Charitable Donation Number?

☐ Yes number ☒ No

PLEASE NOTE: application must be received by the Permit Section of this Department
AT LEAST FOUR WEEKS PRIOR to the date of event.

Dated at Toronto, Ontario this

7th day of JUNE, 19 89.

Signed, Applicant Taku Duko

Address Box 302, Adelaide Road Station

Toronto, Ont. M5C 2J4

Day Telephone No. 461-4255(416)

Representing AFKAN NATIONAL CONGRESS (Name of Organization)

Forward completed application to:

Co-ordinator, Field Recreation Activities
Department of Parks and Recreation
Permit Section, Main Floor West
City Hall, Toronto Ontario
M5H 2N2