



STATE OF ALABAMA  
DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES

**Gulf State Park**

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DEPUTY COMMISSIONER

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DIRECTOR

Robert W. Grant, Jr.  
ASSISTANT DIRECTOR

**SPECIAL EVENTS  
VENDOR PERMIT  
APPLICATION**

Event Date: \_\_\_\_\_

Permit for (Business Name) : \_\_\_\_\_

Location: \_\_\_\_\_

Applicant: \_\_\_\_\_

Phone: \_\_\_\_\_

Type of Event: \_\_\_\_\_

Attendance: \_\_\_\_\_

Day: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_