



**PARACHUTING/SKYDIVING EXHIBITIONS
LICENSE APPLICATION**
Fees: Waived

CITY LICENSE 1st Floor 455 N Main Wichita, KS 67202
(316) 268-4553

1. Sponsoring Organization: _____
 (a) Name of Applicant _____ Phone Number _____
 (b) Business Address _____ Zip Code _____
2. Date(s) of Event _____ Time of Event _____
3. Estimate number of spectators per event _____
4. Location of spectators with relation to drop zone _____
5. Describe the proposed drop zone to include a designation of the size of the drop zone _____

6. Identify all obstacles within or adjacent to the drop zone _____

7. Does this event conform to FAA regulations to flights over municipal areas? _____
8. Has the required insurance policy of at least \$100,000 liability naming the City of Wichita as co-insured for this specific event been filed with the City of Wichita? _____
9. Is there attached to this application written permission from all landowners and/or responsible public bodies?

I hereby apply for a license to permit exhibitions of parachuting and/or skydiving over the City of Wichita in accordance with ordinances of the City of Wichita.

Signature of Applicant

FOR OFFICIAL USE ONLY

LICENSE #	DATE
TOTAL FEE	EXPIRATION DATE