

APPLICATION FOR A PERMIT TO CONDUCT A **DEMONSTRATION OR SPECIAL EVENT IN PARK AREAS**



NATIONAL MALL AND MEMORIAL PARKS Division of Permits Management

900 Ohio Drive, S.W. Washington, DC 20024 Telephone: (202) 245-4715

21-0278

tiyitaan ca		Date of Application:	2/28/2020	12/29/	2020	
SECTION 1: Contact Information						
This is an application for a:						
■ Demonstration	t Definitions on 10-941S, S					
Individual/Organization Women for America First		Telephone Number Cell Phone Fax N (b) (6)			Number	
Email Address		Website WFAF.org				
Street Address					Country	
Person in Charge of Event Kylie Jane Kremer		Telephone Number (b) (6) Cell Phone Num (b) (6)			mber	
Email Address (D) (6)						
Street Address (b) (6)		City Sta (b) (6)			Country	
At least one person must be listed as different locations, please list their nar	in charge of the activity. If ones and contact information	different individuals are to be	in charge of va	rious activitie	s at	
Name Amy Kremer	act Information 6)	Name Jennifer Hulsey	Contac (b) (6	Contact Information (b) (6)		
	act Information	Name	Contac	contact Information		
SECTION 2: Lafayette Park and Wh	nite House Sidewalk					
Is this an application for the use of the Yes No Please be aware that a waiver of the include more than 750 participants or Is this an application for a waiver of the Yes No	numerical limitations is requ that a demonstration in Laf	ired if an expected demonstr	ation on the Wi than 3,000 par	hite House Si ticipants.	dewalk will	
SECTION 3: Event Logistics	Set-Un Dates a	nd Ending Dates				
1/4/2021 Starting Date 1/6/2021	Ending Date 6:00	Starting Time	9:00 Ending Time			
1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Event Dat	es and Times		7.7. 7.		
1/6/2021 Starting 1/6/2021	Ending 9:00	Starting Time 7;00 Ending Time				
1/7/2021 Starting 1/7/2021	Break-down in Ending 8	Dates and Times Starting Time ☐ AM ■ PM	1 1:00	Ending Tin		
Please list ALL proposed locations (in The Ellipse	clude assembly and disper	sal areas):				

Estimated maximum number of participants for EACH PARK AREA TO BE USED (Including organizers, volunteers, participants and spectators): 5,000						
Purpose	of event: First Amendment I	Rally				
Plan for parades, Speaki	proposed activity (include all spea , plans for the orderly termination a ing program in developme	kers, a complete time sch and dispersal of activity w ent and will take pla	nedule of the hich might ICE ON St	e activity, proposed rout affect regular flow of city age and run from	tes for any marches or	
pesc	Handheld Signs/ Placards Quantity:	Chairs Quantity:	[Tables Quantity:	Tents Quantity:	
these iten g the propo	Portable Restrooms Quantity:	Camera Tripod Quantity:		Jumbotrons Quantity:	Generators Quantity: Type: Turf Protective Cover(s)	
Please indicate any of these Items that will be used during the proposed activity:	Banner/Sign(s) Size: Length: Width: Height:	Press Riser Size: Length: Width: Height:	·	Stages Size: Length: Width: Height:	Size: Length: Width: Height:	
Podium Lighting Equipment Distribution of Literature Portable Sound System Estimated # of Buses:			1			
	Please tist all other equipment (include any necessary medical/trailers): Full equipment list TBD					
Are you proposing to solicit donations: Are you proposing food or beverages service⁴: Yes ■ No Yes ■ No				■ No		
Are you proposing road closures or traffic management? If so list the roads and/or trails affected? Yes No Streets surrounding The Ellipse						
How will the event be advertised or publicized: If yes, how are sponsors recognized.					ed.	
If boxes, crates, coffins, or similar items will be used, state whether they are to be carried opened or closed, their proposed size, the materials constructed from, and their proposed contents and use: N/A						
	e your cleanup and/or recycling pla sional Clean Up Team	ans?		leanup members be ider I Safety Vests	ntified?	

Please note there is an additional Temporary Food Establishment Permit Application that must be completed at least 70 days prior to proposed event. Food service is subject to more stringent standards including being preapproved by the National Park Service and meeting Public Health standards. Only ethnic foods that are determined to be integral to the theme of the proposed event are permitted.

NPS Form 10-941 (Rev. 08/2017) National Park Service OMB Control No. 1024-0021 Expiration Date 08/31/2020

nyone who opposes election integrity, conservatives, Trump supporters, or Republicans. ECTION 5: Marshals 5 and Volunteers	Do you have any reason to believe or any information indicating that any individual, group or organization might seek to activity for which this application is submitted?	alsrubt the
nyone who opposes election integrity, conservatives, Trump supporters, or Republicans. ECTION 5: Marshals and Volunteers //ill applicant furnish marshals and/or volunteers?	activity for which this application is addititited:	201100000
Idea and the provided to the marshals and/or volunteers? We note: Marshals are required for all waivers of numerical limitations and for demonstration activities held infinitations with the house Sidewalk and Lafayette Park. Idea the functions the marshals and/or volunteers are expected to perform: Income control / safety Idea will the marshals and/or volunteers be identified? Idea of the safety vests / t-shirts Idea of the safety vests / t-sh	If "Yes", list each such individual, group or organization and contact information for each: Anyone who opposes election integrity, conservatives, Trump supporters, or Republicans.	
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Marshals do not act as police, they help maintain order among participants, provide information to participants and non-participants. Marshals should have knowledge of the overall event organization.



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NATIONAL MALL AND MEMORIAL PARKS

Division of Permits Management 900 Ohio Drive, S.W. Washington, DC 20024 Telephone: (202) 245-4715



SECTION 6: Permit Applicant Information (information for per	erson completing application)			
Name Kylie Jane Kremer	Telephone Number Cell Phone Number (b) (6)		Fax Number	
Position Executive Director / WFAF Board Member	Email Address (b) (6)			
Street Address (b) (c)	City (b) (6)	State 7 (b) (6)	in Code	Country
Signature of Applicant	6 MA	Date 12/28/202	20	

APPLICATION IS NOT VALID UNLESS SIGNED

Hand deliver or mail completed application to:

National Park Service National Capital Region Permits Management Division 900 Ohio Drive, S.W., Washington, DC 20024 Office Phone: (202) 245-4715

Open 8:00 am to 4:00 pm, Monday - Friday