



SOLICITOR'S REGISTRATION

FEE \$20.00

PLUS \$2.50 BADGE FEE

Name of solicitor: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Name: _____

Business Mailing Address: _____

Telephone number: (____) _____

Driver's License Number: _____

This registration expires 190 days from today's date.

This registration is valid starting _____ through _____

Please note that the Solicitor's hours are from 9:00 AM -7:00 PM Monday through Saturday.

Executed this _____ day of _____, _____

Signature

Printed Name

For City Use Only

Approved By: _____ **Date:** _____

Total Paid \$ _____