



SPECIAL EVENTS APPLICATION

SECTION I:

Contact Name: _____ Organization: _____

Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Event Name: _____ Requested Date of Event: _____

Estimated Total Attendance For Event: _____ Number of Years Event Has Been Held: _____

Desired Location: _____

No alcoholic beverages allowed in city owned parks.

SECTION II:

Please provide a full schedule and description of all events to be covered (brochure or flyer required)

Diagram/site plan required of all activities, services and vendors. THE INDEPENDENT CONTRACTOR OR VENDOR SHOULD HAVE AT LEAST \$1,000,000 IN LIABILITY COVERAGE NAMING THE CITY OF NORTH RIDGEVILLE AS ADDITIONAL INSURED AND HAVE A HOLD HARMLESS / INDEMNIFICATION WAIVER FOR MUNICIPALITY. If event includes outside contractors, vendors, or other services (i.e. food vendors, inflatable equipment, etc.), YOU, the independent contractor, are responsible for verifying that each of them has the proper insurance and licenses.

Describe security needed for your event and emergency evacuation procedures

I, the undersigned, understand that by signing this agreement I am the person responsible for any and all situations that may arise during said event.

Signature: _____ Date: _____

SECTION III: COMPLETED BY PARKS & RECREATION DEPARTMENT

Event Application Approved: YES NO

Parks & Recreation Director Signature: _____ Date: _____