

SPECIAL EVENT COMMITTEE APPROVAL FORM

MEETING DATE: 9/28/2022

EVENT NAME: Izaak Walton Appreciation Dinner

ORGANIZER: Mike Sgarioto

E-MAIL ADDRESS: msgarioto@manitowoc.org

EVENT DATE: 10/13/2022

NEW OR RECURRING: Recurring

LOCATION/DESCRIPTION: Appreciation dinner held at Lincoln Park Cabin 1 to celebrate funds raised for Izaak Walton Conservation and new trees planted.

COMMITTEE CONCERNS:

COMMITTEE DECISION:

APPROVE	DENY
Courtney Hansen /ec Jason Freiboth /ec Todd Blaser /ec Dan Koski /ec Kim Lynch /ec	

COUNCIL ACTION REQUIRED:

ITEMS TO INCLUDE IN LETTER:

As part of the 2022 Mayor's budget, most fees for special events were waived. The 2023 budget has not been set. Non-waivable fees will be charged as set by policy.



**CITY OF MANITOWOC – DEPARTMENT OF TOURISM
SPECIAL CONSIDERATION FOR WAIVER OF PART OR ALL FEES
FOR USE OF CITY FACILITIES OR EQUIPMENT**

Groups or organizations requesting special consideration for waiver of all or partial fees ordinarily charged to groups for the use of City-owned facilities or equipment must fill out this form completely, at least 30 days in advance of the event. The request will be reviewed by the Special Event Committee and/or the Public Infrastructure Committee and the group or organization will be notified by e-mail or letter of their decision(s). A financial report for the previous two (2) years indicating all expenses and all revenues of the group/organization may be requested by the committee. Groups or organizations must be current on all financial accounts with the City of Manitowoc.

ALL QUESTIONS MUST BE ANSWERED

Name of event: IZAAK WALTON APPRECIATION DINNER

1. Name of club/organization making request IZAAK WALTON CONSERVATION
 Address _____ Telephone 920-973-7789
 Email _____

2. Names of club officers: Name Address Telephone
 VICE President MIKE SGARIDTO 843 NICHOLAS CT 920-973-7789
 Secretary MTWC
 Treasurer _____

3. Facility requested: LINCOLN PARK CABIN 1 # of people 30
 Equipment requested: TABLES ONLY

4. Specific dates and hours facility/equipment will be used: Date(s) OCT 13 Hrs. 5 PM - 10 AM

5. Please explain your request, as to what fees you desire waived or reduced and reasons TOTAL FEE WE DONATED AROUND 2000 - TO THE CITY THIS YEAR FOR TREE PLANTING

6. Which do you consider your group to be?
 A. Community service B. Non-profit C. Private business _____
 D. Club or organization _____ E. Other, please explain _____

7. Will money be collected, tickets sold, concessions sold or money raised in conjunction with the event?
 Yes _____ No

8. If #7 is "yes," explain and list specific charges _____

9. What will revenues be used for? _____

10. Do you wish to meet personally with the Committee to discuss this request? Yes _____ No ONLY IF DENIED
 If "yes," please provide the following information of individual to contact:
 Name MIKE SGARIDTO Address 843 NICHOLAS CT Telephone 920-973-7789

Signed Mike Sgarido MTWC Date 9-26-22

Please attach any additional information which you feel will assist the committee in evaluating your request.