

SPECIAL EVENT COMMITTEE APPROVAL FORM

MEETING DATE: 12/20/2022

EVENT NAME: Waiver of Fees - Fish and Game Meetings

ORGANIZER: Manitowoc Unit of Fish and Game - Dean Halverson

E-MAIL ADDRESS: dean@leede.com

1/11/23-10/11/23 Second

EVENT DATE: Wednesday Monthly

NEW OR RECURRING: Recurring

LOCATION/DESCRIPTION: Fish and Game meetings to occur monthly at Lincoln Park Cabin 1 from 6pm-10pm January-June and August-October during 2023 for a yearly rate of \$300.

COMMITTEE CONCERNS:

COMMITTEE DECISION:

APPROVE	DENY
Via Email Jason Freiboth /ec Courtney Hansen /ec Kim Lynch /ec Todd Blaser /ec Eric Nycz /ec Dan Koski /ec	

COUNCIL ACTION REQUIRED:

ITEMS TO INCLUDE IN LETTER:



**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.

RECEIVED

ALL QUESTIONS MUST BE ANSWERED

DEC 13 2022

Name of event: Manitowoc Unit of Fish & Game - Monthly Meetings - Lincoln Park - Cabin #1

1. Name of club/organization making request Manitowoc Unit of Fish & Game
 Address C/O Leede Research, 1332 S 26th Street, Manitowoc Telephone 920-683-5940
 Email dean@leede.com

2. Names of club officers: Name Address Telephone
 President TerryBusse
 Secretary Dean Halverson 1332 S 26th Street, Manitowoc WI 54220 920-683-5940
 Treasurer Same

3. Facility requested: Lincoln Park - Cabin #1 # of people 20 to 40
 Equipment requested: Nonw

4. Specific dates and hours facility/equipment will be used: Date(s) Second Wednesday Monthly Hrs. 6 pm to 10pm

5. Please explain your request, as to what fees you desire waived or reduced and reasons Monthly Meetings - January to June, August to October

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 _____
Donatons accepted for lunch and refreshments

9. What will revenues be used for? _____
Covering lunch costs and club activities.

10. Do you wish to meet personally with the Committee to discuss this request? Yes _____ No
 If "yes," please provide the following information of individual to contact:
 Name _____ Address _____ Telephone _____

Signed Dean Halverson - Secretary Treasurer Date 12.15 22

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

When completed, return this form to the City of Manitowoc – Tourism Department
 900 Quay St., Manitowoc , WI 54220 · Phone 920-686-3508 · Fax 920-686-6525 · E-mail echrstel@manitowoc.org