WAIVER OF FEES APPROVAL FORM

APPROVAL DATE: 6/19/2024

RENTAL: KAN Cool for School Supply Giveaway ORGANIZER: Jeff Dvorachek E-MAIL ADDRESS: jdvorachek@ha.cpa **RENTAL DATE: 8/9 - 8/12/2024** LOCATION/DESCRIPTION: Use of traffic control items on Roncalli property to distribute school supplies. **COMMITTEE CONCERNS: COMMITTEE DECISION: APPROVE** DENY Dan Koski /ec Eric Nycz /ec Todd Blaser /ec Courtney Hansen /ec ITEMS TO INCLUDE IN LETTER:

Event 2 Copy to: Clerk



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 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. For more information about park facilities, equipment for special events and/or the City of Manitowoc Special Event Guidelines and Policy for events on City property, visit www.manitowoc.org/parks.

Name	of event: School Supply Giveaway				
1.	Name of club/organization making request KAN COOL for School INC				
	Address PO BOX 22 SY MANITOWOC Telephone 920-645-1079				
2.	Names of club officers: Name Address Telephone				
	President Debbic Rhein 8836 Arrow Rd. Whoc 920-860-1890				
	Secretary Jeff Dvorachek 942 Sarah Miles Ln. 14th 920-645-1079				
	Treasurer Mary Burckle 2240 Mino Dr # 18, Wtwc 920-905-9690				
3.	Facility requested: NIA # of people NIA				
	Equipment requested: 45 - 28" reflective cones + 5 - 12' rail type barricades				
4.	Date & time facility/equipment will be used: Date(s) 8/9/24 - 8/12/24 Hrs				
5.	Please explain your request, as to what fees you desire waived or reduced and reasons.				
	Used for traffic control on private property (Roncalli High School).				
	We are a fax exempt organization.				
6.	Which do you consider your group to be? A. Community service B. Non-profitX C. Private business				
	D. Club or organization E. Other, please explain				

7.	Will money be col YesNo_	ected, tickets sold, concessions sold or mo	oney raised in conjunction with the eve	nt?	
8.	If #7 is "yes," explain and list specific charges_				
9.	What will revenue	be used for? NIA			
10.	Do you wish to meet personally with the Committee to discuss this request? Yes No				
	Name	Email	Phone #		
ordin tempo waiva The u or per broug liable agree signin receiv	ances, traffic rules, por por property beer/wine licentable. I further undersundersigned agrees to resonal injury claims of the configuration of the configu	Event organizers and participants must coark rules, state health laws, fire codes and ses, stake and firework permits, and other tand that an incomplete application may be indemnify and hold the City of Manitowo courring during this event. It is further aghall be at the sole risk of the undersigned, mage to said property or injury to any permit any damage caused to said facility or equal to the special Events Guidelines and Polarity and Polari	liquor licensing regulations. Fees for necessary licenses and permits are nonce cause for denial of the waiver. The charmless for any and all damage claist greed that all personal property of any key, and that the City of Manitowoc shall necessary many many that the city of manitowoc shall necessary many many that the city of manitowoc shall necessary many many that the city of manitowoc shall necessary many many that the city of manitowoc shall necessary many that the city of many that the city of manitowoc shall necessary many than the city of manitowoc shall necessary many than the city of manit	ms cind oot be l / vc	
	rements as stated in the his signed agreement	ne Special Events Guidelines and Policy, a		ce	
Signe		rachel	Date 6/4/24		

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

When completed, return this form to:

City of Manitowoc – Tourism Department 900 Quay St., Manitowoc, WI 54220 E-mail: tourism@manitowoc.org

Fax: 920-686-6525 Phone: 920-686-3508