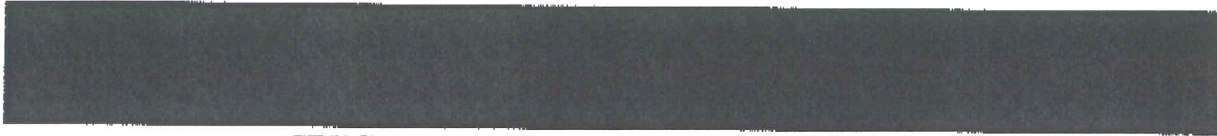


15-3/3



### SPECIAL EVENTS APPLICATION FORM

- 1. Name/Description of Event: YOGA @ WASHINGTON PARK
- 2. Date of Event: 7/11/15 If multiple days, Start Date:        /        /        End Date:        /        /
- 3. Time Event will start to form: 8:00 AM/PM Actual Start Time: 10:00 AM/PM Finish Time: 1:30 AM/PM
- 4. Name and complete address of Organization/Individual organizing the Event:

TERESA FALVEY?  
Name of organization, if applicable

TERESA MARIE FALVEY  
Name (first, middle, and last) of individual organizing the Event

6391 W. 60th AVE. #310  
Street Address

ARVADO, CO 80003  
City, State, ZIP

Telephone # (303) 941-7931

Business # ( )         
(if applicable)

Date of Birth 8/19/81  
of organizing individual

Is the sponsoring organization a 501(c)(3) organization?  Yes  No

5. Email address of organizer: tfalve@yahoo.com

6. Location of the Event: Please attach a detailed map or diagram of your event. Also, please indicate the direction of the route, if any, including all turns and the number of traffic lanes to be used. EVERYTHING WILL BE HELD ON THE GRASS IN FRONT OF THE METRO STAGE ITSELF.

Will the event be held in a Manitowoc park or utilize any park facilities?  Yes  No Which park? WASHINGTON PARK

Have you reserved the park for this purpose?  Yes  No If no, please contact the Parks Department at (920) 686-3580.

Does the event require streets to be closed?  Yes  No If yes, which street(s):       

Will the event be held indoors?  Yes  No If yes, what building?         
Building Name & Street Address

7. Tell us about your Event: I HAVE ATTACHED A DESCRIPTION ON A SEPARATE PAPER.

Will food be prepared and/or served at the event?  Yes  No POSSIBLY FROM VENDORS.  
*You are responsible for obtaining any necessary permits for food from the Manitowoc County Health Department.*

Will you be having a band or amplified music?  Yes  No MUSIC FROM A STAGED

What is the estimated attendance at your event, including observers? 50-75?

How many vendors will be at your event? ? 10-15 How many vehicles? ?

Do you require any special parking restrictions?  Yes  No If yes, what type, when, and where:       

Will any of the following services be required?  Barricades  Clean-up  Street-sweeping NO  
*For help defining your parking, clean-up, and barricade needs, please contact the Department of Public Works at (920) 686-6550.*

Will a tent or any other temporary structures be erected?  Yes  No POSSIBLE w/ VANDOOIS

Will any fireworks or pyrotechnic devices be used during the event?  Yes  No  
Contact the Fire Department at (920) 686-6540 to secure the proper permits for firework usage.

What toilet facilities will be made available to your participants?  Indoor  Outdoor  
Please describe the toilet facilities that will be provided, including their locations and the number of units: I WOULD LIKE  
TO HAVE 1 or 2 PORTA POTTY'S BUT UNSURE HOW MUCH TO RENT THEM.

Will alcoholic beverages be served/sold?  Yes  No If yes, a "Special Class B" license will allow sale/service of beer and/or wine.  
Please contact the City Clerk's Office at (920) 686/6950 to obtain a license.

8. Safety and Security for Your Event:

Do you have the correct level of insurance for your specific event?  Yes  No  
Please see the Special Events Insurance Form to ensure you have the proper coverage. You must submit the insurance certificate to the City Clerk's Office at least 10 days before your event.

Designated contact person for the event:

THELISA FALVEY (303) 941-7981 (303) 941-7981  
Name of Day-of coordinator Phone # before event Phone # the day of the event

Is security needed for this event?  Yes  No

\_\_\_\_\_  
Name of Security Coordinator ( ) Phone # before event ( ) Phone # the day of the event

Do you have a plan in place to deal with medical emergencies that may occur during your event?  Yes  No I AM CAP/FIRST AID CERTIFIED.

9. Fees & Reimbursement: The standard fees for equipment rental and licenses will apply. The City may also require reimbursement for extraordinary expenses for your event. To request a waiver of the extraordinary expenses, please submit a letter detailing your request.

10. Legal Notice

I understand the filing of this application does not ensure approval of a Special Event. I also understand that all Special Event organizers and participants must comply with all applicable City ordinances, traffic rules, park rules, state health laws, fire codes, and liquor licensing regulations. Fees for park facilities, liquor licenses, tent and fireworks permits, and other necessary licenses and permits are in addition to the fees submitted for the Special Events Application. I further understand that an incomplete application may be cause for the denial of the event.

The undersigned agrees to indemnify and hold the City of Manitowoc harmless for any and all damage claims or personal injury claims occurring during this event. It is further agreed that all personal property of any kind brought on the premises shall be at the sole risk of the undersigned, and that the City of Manitowoc shall not be liable for any injury, loss or damage to said property or injury to any persons on the premises. The undersigned agrees to be responsible for any damage caused to said facility or equipment by mischief or negligence. By signing, I acknowledge that I have authority to bind the sponsoring organization and acknowledge that I have received, read and understand the Special Events Policy and agree to be bound by all requirements as stated in the Special Events Policy and it is hereby incorporated by reference into this signed agreement.

Signature of Applicant: [Signature] Date: 3/9/15

COMMITTEE RECOMMENDATION: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMON COUNCIL APPROVAL: \_\_\_\_\_ DATE: \_\_\_\_\_

DID COMMON COUNCIL WAIVE FEES & REIMBURSEMENT?  Yes  No

Attn: Manitowoc Board of Parks & Rec.

My name is Theresa Falvey and I was asked to write up a description of what I am looking to do with Washington Park on Saturday July 11<sup>th</sup>, 2015.

I am a yoga instructor amongst other professions and am currently living in Colorado but I am originally from Manitowoc and will be moving back to the area in June. This Event is my baby but Paula Petri who owns Angels Landing Yoga & Healing in Two Rivers will be my right hand person on this venture. In Denver they have an event called "Yoga Rocks the Park", where every Sunday in the summer they bring live music and a yoga instructor from the area, who leads many people from people never having done yoga, to well seasoned yogi's. It is a great event that brings awareness to yoga but it also creates community and oneness and that is what my intention is to be for this event. To bring more of the community of Manitowoc and surrounding communities together in a celebration of yoga, which instills peace and harmony.

Other Intentions/Wants for the Yoga @ Washington Park Event:

- ~Vendors- I would like to charge them a possible fee of \$25 to have a table/booth to sell their goods. These vendors would be made up of small businesses from Manitowoc such as: Wrap It Up, The Fitness Store, Now Nutrition, etc. such businesses that for the most part create wellness and healthy living.
- ~Charging-I would like to charge a fee of \$15 to all participants. "Event Bright" is an online way for people to purchase tickets and they will be able to buy tickets at the entrance as well.
- ~All participants will have to fill out Liability forms before doing any yoga that day.
- ~There will be a sound system being used.

Time:

- 8:00AM- Set up begins for event
- 9:30AM-Registration begins
- 10:00AM-11:30AM- Yoga Session
- 11:30AM-12:30PM-Community can checkout vendors and relax and enjoy some time together.
- 12:30PM-1:30PM -Clean up and take down for event

I really hope you consider giving this Event Approval. This is a dream I have been wanting to do for some time and would love to get the chance to bring more of Manitowoc and the surrounding communities together with this event.

Please let me know if you have any other questions, I would be happy to answer them.

Many thanks,

Theresa Falvey

MAR 5 REC'D



**Manitowoc Parks & Recreation Departments**

**METROSTAGE REQUEST FORM**

Name of individual, firm or organization making request INGRISA TALVEY & PAULA PETRI

If club or organization, name of person responsible \_\_\_\_\_

Address 16391 W. 160<sup>th</sup> AVE. #210 ARVADA, CO 80003 Telephone 303 941 7981

**Purpose:** The Renter states that he will use the premises rented hereunder for the following purpose and none other: (list organization if possible) COMMUNITY YOGA EVENT Renter agrees to pay additional rental fee of \$300.00 in the event the premises are used for any purpose other than those stated in above.

Which do you consider your group to be?

- a. Community
- b. Private Business \_\_\_\_\_
- c. Club/Organization \_\_\_\_\_
- d. Other, Please explain \_\_\_\_\_

**Rental Period:** The Bandshell shall be rented to the Renter by the City on JULY 11<sup>th</sup>, 2015 for the period from 8:00 AM/PM to 1:30 AM/PM on such date. It is understood that the Renter's responsibility to clean & restore the premises including garbage pickup must be completed within this period.

**POLICIES**

MAR 5 REC'D

**Use of Facility**

- 1) The use of the bandshell is not allowed without prior approval of the Manitowoc Parks & Recreation Departments.
- 2) Only officially approved vehicles are allowed within the park. A list of vehicles for entry into the park must accompany request for the use of the facility.
- 3) It is understood that any City of Manitowoc police officer and any other authorized City of Manitowoc employee have the right to enter the rented premise at any time.
- 4) The City of Manitowoc it not responsible for any articles left, lost or stolen on the rented premises.
- 5) No admission fees, donations, contributions or other fare shall be collected or be permitted to be collected by the renter unless prior approval has been secured in writing from the Recreation Board.

**Responsibility of User**

- 1) The user will furnish all personnel & equipment necessary to run event.
- 2) The user is responsible to notify participants, spectators, and staff associated with the event of department policies & regulations.
- 3) It is the responsibility of the organization using the facility to obtain all necessary permits or licenses required by City ordinance, resolution or state law, such as but not limited to alcohol, food, soda, etc.
- 4) The user agrees to provide the city with a certificate of liability insurance in the amount of \$300,000.
- 5) No changes in the physical appearance of the area shall take place without prior approval of the Parks Manager.
- 6) It shall be the responsibility of the renter to maintain the area including restrooms throughout the event and to restore all areas and facilities to the condition they were in prior to the event. The renter agrees to pay additional fees for damages or extra time required to clean and restore the facility. This amount will be determined by the Parks Department.
- 7) It shall be the responsibility of the renter to control spectators, vehicles, and all situations involved with the event. If necessary, additional deputies may be required.
- 8) It is the responsibility of the user to have premises vacated by 10:00 PM each evening during the term of the request.

**Fees and charges**

Groups/Organizations requesting special consideration for waiver of all or partial fees ordinarily charged to groups for use of City-owned facilities or equipment must fill out the Fee Waiver Request Form completely, at least 30 days in advance of the event. The request will be reviewed by the Parks and Recreation Committee, and the group or organization will be notified of approval or denial within 15 days of the Committee's decision.

- 1) The cost of the facility is \$50.00 per day
- 2) Renter agrees to pay the deposit fee at the time of making this application. Of a minimum of 20% of the total rental as breakage security which may later be applied to the base rental fee. The balance is due 24 hours prior to the rental date.
- 3) The daily fee is intended to cover the time period of 7:00 AM to 10:00 PM on the days indicated.

**Additional Fees**

- 1) Attendant Fee- A department attendant may be on duty when the facility is occupied. The current attendant rate per hour will be charged for the time spent at the event. Renter is responsible for the attendance and must follow his/her suggestions or directions.
- 2) Park Benches- If available, benches may be used for the event for a fee of \$5.25 + tax per bench.

**PROVISIONS**

The approval of this request is based upon the condition that the user agrees to indemnify and hold harmless the City from any accident or injuries to participants, spectators, and/or persons connected with the use of requested facilities or equipment.

It is further agreed that all property of any kind brought on the premises shall be at the sole risk of the undersigned and that the City shall not be liable for any injury, loss or damage to said property or injury to any person the premises.

The undersigned agrees to be responsible for any damage cause to said building, property or equipment by mischief or negligence.

This document signed on below date by authorized representative of the user and the lessee indicates that agreement is understood and will be adhered to by both parties.

Do you desire park benches?       Yes, # of benches (40 max.) \_\_\_\_\_       No

Signed \_\_\_\_\_  
(Person Responsible)

Date 3/3/15

Terms or Conditions \_\_\_\_\_

Amount of rent to be charged \_\_\_\_\_      Deposit Received: \$ \_\_\_\_\_

Approved/Denied \_\_\_\_\_      Date \_\_\_\_\_  
(Parks Manager)



# MANITOWOC PARKS & RECREATION DEPARTMENTS EQUIPMENT & FACILITY REQUEST FORM

FACILITY REQUESTED

EQUIPMENT REQUESTED (Be Specific)

SB Diamonds \_\_\_\_\_

Garbage Cans \_\_\_\_\_

BB Diamonds \_\_\_\_\_

Picnic Tables \_\_\_\_\_

Soccer Field \_\_\_\_\_

Benches \_\_\_\_\_

Tennis Courts - How Many? \_\_\_\_\_

Other \_\_\_\_\_

Pool \_\_\_\_\_

Staging \_\_\_\_\_

AREA REQUESTED WASHINGTON PARK

Number of People ? DATE DESIRED 1/11/15 TIME REQUESTED 8:00AM - 1:30PM  
4-2 PEOPLE HOST, 10? VENDORS, ? ATTENDEES? Be Specific

WHAT WILL THE EQUIPMENT/FACILITY BE USED FOR? A MORNING COMMUNITY YOGA CLASS, W/ HEALTH/WELLNESS/LOCAL BUSINESS VENDORS.

PERSON WHO WILL BE RESPONSIBLE THELMA TALVOY TELEPHONE 303)941-7981

PERSON MAKING REQUEST THELMA TALVOY

TELEPHONE 303)941-7981 ADDRESS 6391 W. 60th AVE. #310  
PRVADA, CO 8003

WHO WILL BE BILLED IF THERE ARE ANY CHARGES

NAME THELMA TALVOY  
ADDRESS 4309 JUST CT. MANITOWOC, WI 54220

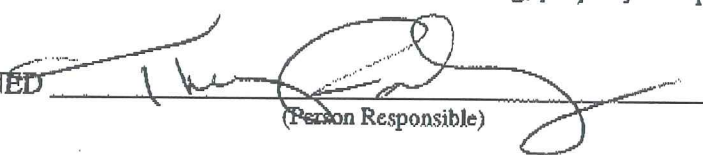
**PROVISIONS:**

The undersigned agrees to hold the City harmless for any and all damage, claims or personal injury claims occurring during the term of this contract.

It is further agreed that all property of any kind brought on the premises shall be at the sole risk of the undersigned and that the City shall not be liable for any injury, loss or damage to said property or injury to any person on the premises.

The undersigned agrees to be responsible for any damage caused to said building, property or equipment by mischief or negligence.

CHARGES \_\_\_\_\_

SIGNED   
(Person Responsible)

APPROVED \_\_\_\_\_

DATE \_\_\_\_\_

\_\_\_\_\_  
Parks or Recreation Manager

DATE \_\_\_\_\_

ATTENDENT(S) \_\_\_\_\_

START TIME: \_\_\_\_\_

**MANITOWOC PARKS DEPARTMENT  
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 Parks & Recreation Committee and the group or organization will be notified within 15 days of submitted request.

**A CURRENT FINANCIAL REPORT FOR THE PREVIOUS TWO (2) YEARS INDICATING ALL EXPENSES AND ALL REVENUES OF THE GROUP/ORGANIZATION MUST ACCOMPANY THIS FORM PRIOR TO THE COMMITTEE REVIEWING THE REQUEST.**

**ALL QUESTIONS MUST BE ANSWERED**

1. Name of club/organization making request THREESA FALVEY  
Address 6391 W. 60th AVE. #310 Telephone 303)941-7981  
PREVADA, CO 80003
2. Names of club officers: Name Address Telephone  
President THREESA FALVEY 6391 W. 60th AVE. #310 303)941-7981  
PREVADA, CO 80003  
CO-PRESIDENT PAULA PETZI 2922 10th St. 920)242-5014  
TWO RIVERS, WI 54241  
Secretary PAULA PETZI  
Treasurer BOTH PAULA & THREESA
3. Facility requested: WASHINGTON PARK  
Equipment requested: NONE
4. Specific dates and hours facility/equipment will be used: Date 7/11/15 Hrs. 8:00AM - 1:30PM
5. Please explain your request, as to what fees you desire waived or reduced and reasons. ANY HELP IN THE REDUCTION OF COST WOULD BE GREATLY APPRECIATED AS BOTH PAULA AND I WORK VERY HARD AT OUR DAY JOBS BUT NOT ALOT IN THE BUDGET FOR EXTRAS, JUST REALLY WANTING TO BEING THE COMMUNITY TOGETHER.
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 2 YOGA INSTRUCTORS PUTTING ON A COMMUNITY EVENT.
7. Will money be collected, tickets sold, concessions sold or money raised in conjunction with the event?  
Yes X No \_\_\_\_\_
8. If #7 is "yes," explain and list specific charges I WOULD LIKE TO SELL TICKETS FOR \$15 FOR PARTICIPANTS AND \$25 FOR VENDORS TO HAVE A BOOTH.
9. What will revenues be used for? TO POSSIBLY DO MORE EVENTS LIKE THIS.
10. Do you wish to meet personally with the Board/Committee to discuss this request? Yes \_\_\_\_\_ No X  
If "yes," please provide the following information of individual to contact:  
Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone \_\_\_\_\_

Signed Theresa Falvey Date 3/9/15

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

**When completed, this form is to be returned to the Manitowoc Parks Department, 2655 S. 35th St., Manitowoc, WI 54220.**