

15-296

MAR 6 REC'D

**NOTICE: This application must be on file in the City Clerk's Office a minimum of 30 days prior to the date of the event. Your Certificate of Insurance must be on file in the City Clerk's Office a minimum of 10 days prior to the date of the event.**

**SPECIAL EVENTS APPLICATION FORM**

- 1. Name/Description of Event: Volleyball Fund Raising Tournament
- 2. Date of Event: 04/11/2015 If multiple days, Start Date: \_\_\_/\_\_\_/\_\_\_ End Date: \_\_\_/\_\_\_/\_\_\_
- 3. Time Event will start to form: 9:00 AM/PM Actual Start Time: 9:30 AM/PM Finish Time: 7:00 AM/PM
- 4. Name and complete address of Organization/Individual organizing the Event:

Friends of CPRC  
Name of organization, if applicable

Telephone # (920) 652-4440

Lisa M Hansen  
Name (first, middle, and last) of individual organizing the Event

Business # (920) 684-8088  
(if applicable)

2005 Madison St  
Street Address

Date of Birth 07/27/1973  
of organizing individual

Manitowoc WI 54220  
City, State, ZIP

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

5. Email address of organizer: Lisagrod11@hotmail.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. Citizen Park Rec Center Building (skating rink)

Will the event be held in a Manitowoc park or utilize any park facilities?  Yes  No Which park? Citizen 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? Citizen Park Building S North 18th St  
Building Name & Street Address

7. Tell us about your Event:

Will food be prepared and/or served at the event?  Yes  No

*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

What is the estimated attendance at your event, including observers? 60-100

How many vendors will be at your event? 0 How many vehicles? 50

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  
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

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: \_\_\_\_\_

Toilets already located inside building

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:

Lisa Hansen  
Name of Day-of coordinator

(920) 652 - 4440  
Phone # before event

(920) 652 - 4440  
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

**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: Lisa Hansen

Date: 2/21/2015

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

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

DID COMMON COUNCIL WAIVE FEES & REIMBURSEMENT ?  Yes  No

MANITOWOC PARKS & RECREATION DEPARTMENTS  
EQUIPMENT & FACILITY REQUEST FORM

FACILITY REQUESTED

SB Diamonds     

BB Diamonds     

Soccer Field     

Tennis Courts - How Many?     

Pool     

EQUIPMENT REQUESTED (Be Specific)

Garbage Cans     

Picnic Tables     

Benches     

Other Volleyball nets used for rec center league

Staging     

AREA REQUESTED Building at Citizen Park

Number of People 60-100 DATE DESIRED 4/11/2015 TIME REQUESTED 9am-7pm  
Be Specific

WHAT WILL THE EQUIPMENT/FACILITY BE USED FOR? a Volleyball tournament

PERSON WHO WILL BE RESPONSIBLE Lisa Hansen TELEPHONE 920-652-4440

PERSON MAKING REQUEST Lisa Hansen

TELEPHONE 920-652-4440 ADDRESS 2005 Madison St Manitowoc, WI 54220

WHO WILL BE BILLED IF THERE ARE ANY CHARGES

NAME Friends of CPRE  
ADDRESS 930 N 18th St Manitowoc

**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 Lisa Hansen  
(Person Responsible)

APPROVED \_\_\_\_\_ DATE 2/21/2015

\_\_\_\_\_  
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 Friends of CPRC  
 Address 930 N 18th St Manitowoc Telephone 920-684-8088
  
2. Names of club officers:
 

Name	Address	Telephone
President <u>John Brunner</u>	<u>1410 Dewey St Mtroc</u>	<u>920-684-8088</u>
Secretary <u>April Selner</u>	<u>930 N 18th St Mtroc</u>	<u>920-905-9859</u>
Treasurer <u>Nyla Pitsch</u>	<u>930 N 18th St Mtroc</u>	<u>920-901-8791</u>
  
3. Facility requested: Citizen Park Rec Center Building  
 Equipment requested: Volleyball nets and balls
  
4. Specific dates and hours facility/equipment will be used: Date 4/11/2015 Hrs. 9am-7pm
  
5. Please explain your request, as to what fees you desire waived or reduced and reasons. would like to waive the insurance since this is a volleyball tournament similar to the rec center league
  
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 teams to pay for participation in event, selling food and alcoholic beverages
  
9. What will revenues be used for? All profits will be given to ~~the~~ friends of CPRC to help with the building
  
10. Do you wish to meet personally with the Board/Committee to discuss this request? Yes \_\_\_\_\_ No   
 If "yes," please provide the following information of individual to contact:  
 Name Lisa Hansen Address 2005 Madison St Telephone 920-652-4440

Signed Lisa Hansen Date 2/11/2015

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. 35<sup>th</sup> St., Manitowoc , WI 54220.**

Committee Action:    Approved \_\_\_\_\_ Denied \_\_\_\_\_                      Date \_\_\_\_\_

## Sandy Ronski

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**From:** Denise Larson  
**Sent:** Tuesday, February 17, 2015 11:17 AM  
**To:** Jason Sladky  
**Cc:** Sandy Ronski  
**Subject:** FW: Volleyball tournament

Please add this to the next P & R committee meeting.

Thanks,

Denise Larson,

Recreation, Sr. Center, & Zoo Division Manager  
3330 Custer Street  
Manitowoc WI 54220  
686-3060  
[dlarson@manitowoc.org](mailto:dlarson@manitowoc.org)

**From:** John Brunner [<mailto:john@thefitnessstore.com>]  
**Sent:** Tuesday, February 17, 2015 10:51 AM  
**To:** Denise Larson; Lisa Hansen  
**Subject:** Volleyball tournament

Hi Denise!

My Wife, Lisa Hansen and her friend Emily Howe are in the planning stages of an April 11th Volleyball Tournament at the Citizen Park Rec Center, as a benefir fund raiser for the CPRC Friends group.

We would obviously like to maximize the return of an event like this by reducing cost required to hold the event and as you know, insurance can take a big chunk of the profits from our fundraising events. One thought I had is that since Volleyball IS a Rec Department activity, could we get the City Recreation Department in as a co-sponsor/co-promoter of the event, and allow the insurance to fall under the City Rec Department.

We are not asking for any additional assistance in the planning, but simply allowing us to fall under City Insurance and to not have to pay rent for the building would make this event a much bigger success at least in it's profitability.

The plan is to also have beer available. Please let us know if this might effect the willingness on the part of the City to get involved.

Myself, Lisa or Emily would be happy to meet with you at your convenience.

Thank you!

John

--

**John Brunner**

**The Fitness Store  
1410 Dewey St  
Manitowoc, WI 54220**

**Serious Equipment for Serious Fitness!**

# Friends of Citizen Park Rec Center

Treasurer's Report - **ACCOUNTS**

Period Ending **1/31/15**



## Account Balances

Checking Account Balance	\$1,359.82
Money Held At City Of Manitowoc	\$10,843.07

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TOTAL BALANCES: \$12,202.89

## Money Spent By City Of Manitowoc On Renovations

West Foundation Grant	\$25,000.00
Sunrise Rotary Club Donation	\$1,000.00

## Building Expenses Paid To Date

ADA Room Drawing	\$1,600.00
A.C.E. Building - bathrooms	\$32,337.00
Bathroom - in kind donation from contractors	\$3,905.00

DATE PAID	CHECK #
9/12/2012	566
8/20/2013	532

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TOTAL EXPENSES PAID: \$63,842.00

TOTAL MONIES RAISED: \$76,044.89

## Donation Pledges - 5 Year

	REMAINING PLEDGE	TOTAL PLEDGE	PAID
Mike Howe Builders PLEDGED IN 2013	\$400.00	\$500.00	\$100.00
Rollaire Skate Center PLEDGED IN 2013	\$6,000.00	\$10,000.00	\$4,000.00
The Fitness Store PLEDGED IN 2013	\$400.00	\$500.00	\$100.00

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Total: \$6,800.00

PLEASE NOTE - PAID PLEDGES ARE ALREADY INCLUDED IN ACCOUNT BALANCE TOTAL.

**GRAND TOTAL: \$82,844.89**



## Sandy Ronski

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**From:** Lisa Hansen <lisagrad11@hotmail.com>  
**Sent:** Monday, March 02, 2015 8:28 AM  
**To:** Sandy Ronski  
**Subject:** Fwd: Volleyball tournament  
**Attachments:** Special Events App Form 2-2014.pdf; ATT00001.htm; Equipment & Facility Request Form - 04-2012.pdf; ATT00002.htm; Waiver of fees - 04-2012.pdf; ATT00003.htm

Sandy

We have decided to go ahead with the event and do our own insurance. Would I still need to send you all the paperwork and attend the meeting?

Thanks  
Lisa

Sent from my iPhone

Begin forwarded message:

**From:** John Brunner <[john@thefitnessstore.com](mailto:john@thefitnessstore.com)>  
**Date:** February 17, 2015 at 12:50:24 PM CST  
**To:** [mlehowe@yahoo.com](mailto:mlehowe@yahoo.com), Lisa Hansen <[lisagrad11@hotmail.com](mailto:lisagrad11@hotmail.com)>  
**Subject:** Fwd: FW: Volleyball tournament

----- Forwarded message -----

**From:** Sandy Ronski <[sronski@manitowoc.org](mailto:sronski@manitowoc.org)>  
**Date:** Tue, Feb 17, 2015 at 12:43 PM  
**Subject:** FW: Volleyball tournament  
**To:** "[john@thefitnessstore.com](mailto:john@thefitnessstore.com)" <[john@thefitnessstore.com](mailto:john@thefitnessstore.com)>  
**Cc:** Karen Dorow <[kdorow@manitowoc.org](mailto:kdorow@manitowoc.org)>, Sue Reilly <[sreilly@manitowoc.org](mailto:sreilly@manitowoc.org)>

Please complete the attached Special Event Application form for the Volleyball Tournament. The Equipment & Facility Request Form should only be completed if you need any equipment beyond the items already located at the facility, such as additional tables, garbage cans, etc. There is also a Waiver of Fees form included. Forms can also be found online by going to [www.manitowoc.org/parkandrec](http://www.manitowoc.org/parkandrec), then click on "Administration & Boards," and then "Forms & Permits."

After the forms are completed, please return the signed forms to the Parks Office:

Manitowoc Parks Department,

Attn: Sandy,

2655 S 35th St.