

# SPECIAL EVENT COMMITTEE APPROVAL FORM

**MEETING DATE:** 6/22/2022

**EVENT NAME:** Lakeshore Foster Families and Friends Picnic

**ORGANIZER:** Lisa Stolp

**E-MAIL ADDRESS:** n/a

**EVENT DATE:** 5/20/2023

**NEW OR RECURRING:** Recurring

**LOCATION/DESCRIPTION:** Using Lincoln Park Field House to host a picnic and games for the organization

**COMMITTEE CONCERNS:**

**COMMITTEE DECISION:**

APPROVE	DENY
Todd Blaser /ec Jason Freiboth /ec Billy Hutterer /ec Brock Wetenkamp /ec	

**COUNCIL ACTION REQUIRED:**

**ITEMS TO INCLUDE IN LETTER:**



**CITY OF MANITOWOC – DEPARTMENT OF PUBLIC INFRASTRUCTURE  
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: Lakeshore Foster Families and Friends Picnic
- Name of club/organization making request Lakeshore Foster Families & Friends (LFFF)  
Address 1011 Washington Suite #6 Manitowoc Telephone (920) 860-8122
  - Names of club officers:
 

Name	Address	Telephone
President <u>Molly Stolp</u>	<u>1312 Rockledge Rd Mishicot</u>	<u>(920) 629-4684</u>
Secretary <u>Kari Mueller</u>	<u>5601 Sells Rd Utica</u>	<u>(920) 323-5705</u>
Treasurer <u>Billy Bittner</u>	<u>3311 Monroe St TR</u>	<u>(920) 242-3149</u>
  - Facility requested: Lincoln Field House or Cabin 2  
Equipment requested: Tables & chairs inside, picnic tables and room for a couple small outdoor games
  - Specific dates and hours facility/equipment will be used: Date(s) 5-20-23 Hrs. 4hr event
  - Please explain your request, as to what fees you desire waived or reduced and reasons: Requesting waiver of fee for facility - we are funded by private donations and some small grants
  - 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 \_\_\_\_\_
  - Will money be collected, tickets sold, concessions sold or money raised in conjunction with the event?  
Yes  No
  - If #7 is "yes," explain and list specific charges \_\_\_\_\_
  - What will revenues be used for? No revenues - service to foster families and kinship families to have an outing and talk to people in similar situations
  - 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 Molly Stolp - board member Date 5-16-23

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