

Publ. Info.
3-3-14

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: HFM Maritime Marathon
- 2. Date of Event: 6/22/2014 If multiple days, Start Date: / / End Date: / /
- 3. Time Event will start to form: 5:00 AM PM Actual Start Time: 7:00 AM PM Finish Time: 1:00 AM PM
- 4. Name and complete address of Organization/Individual organizing the Event:

HFM Maritime Marathon
Name of organization, if applicable

David Yeghajian
Name (first, middle, and last) of individual organizing the Event

2300 Western Ave
Street Address

Manitowoc, WI 54800
City, State, ZIP

Telephone # (920) 320-4283

Business # () -
(if applicable)

Date of Birth / /
of organizing individual

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

- 5. Email address of organizer: dyeghajian@hfmhealth.org
- 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. _____

Will the event be held in a Manitowoc park or utilize any park facilities? Yes No Which 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): _____

East lanes of Lakeside Blvd

Will the event be held indoors? Yes No If yes, what building? _____
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? 500

How many vendors will be at your event? _____ 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
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: _____

none on city property

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:

Dave Nickels
Name of Day-of coordinator
David Yeshaian
Is security needed for this event? Yes No

(920) 242-0899
Phone # before event
920-320-4280

(920) 242-0899
Phone # the day of the event
414-698-6747

Name of Security Coordinator

() _____
Phone # before event

() _____
Phone # the day of the event

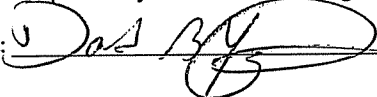
Do you have a plan in place to deal with medical emergencies that may occur during your event? Yes No

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.

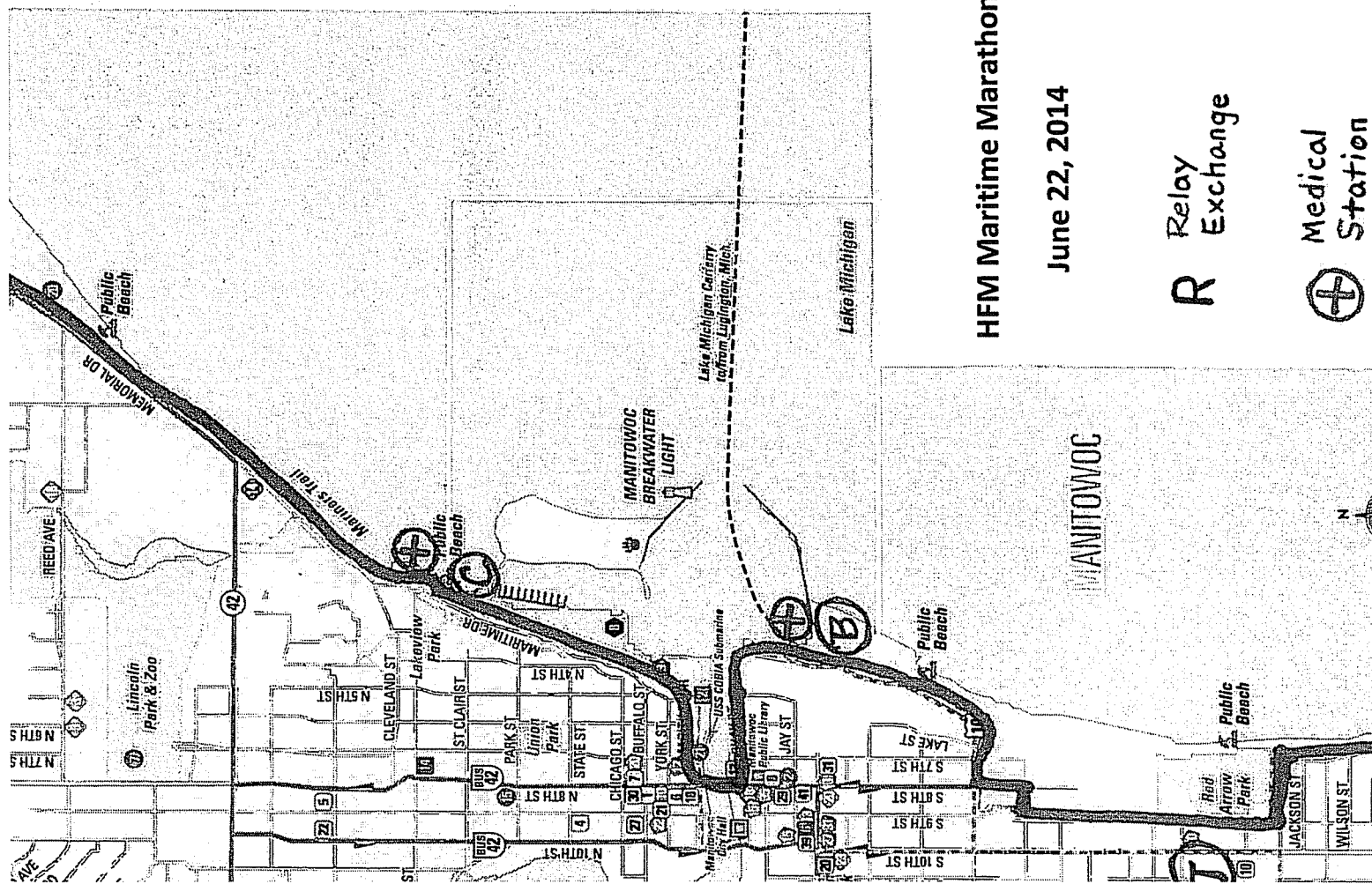
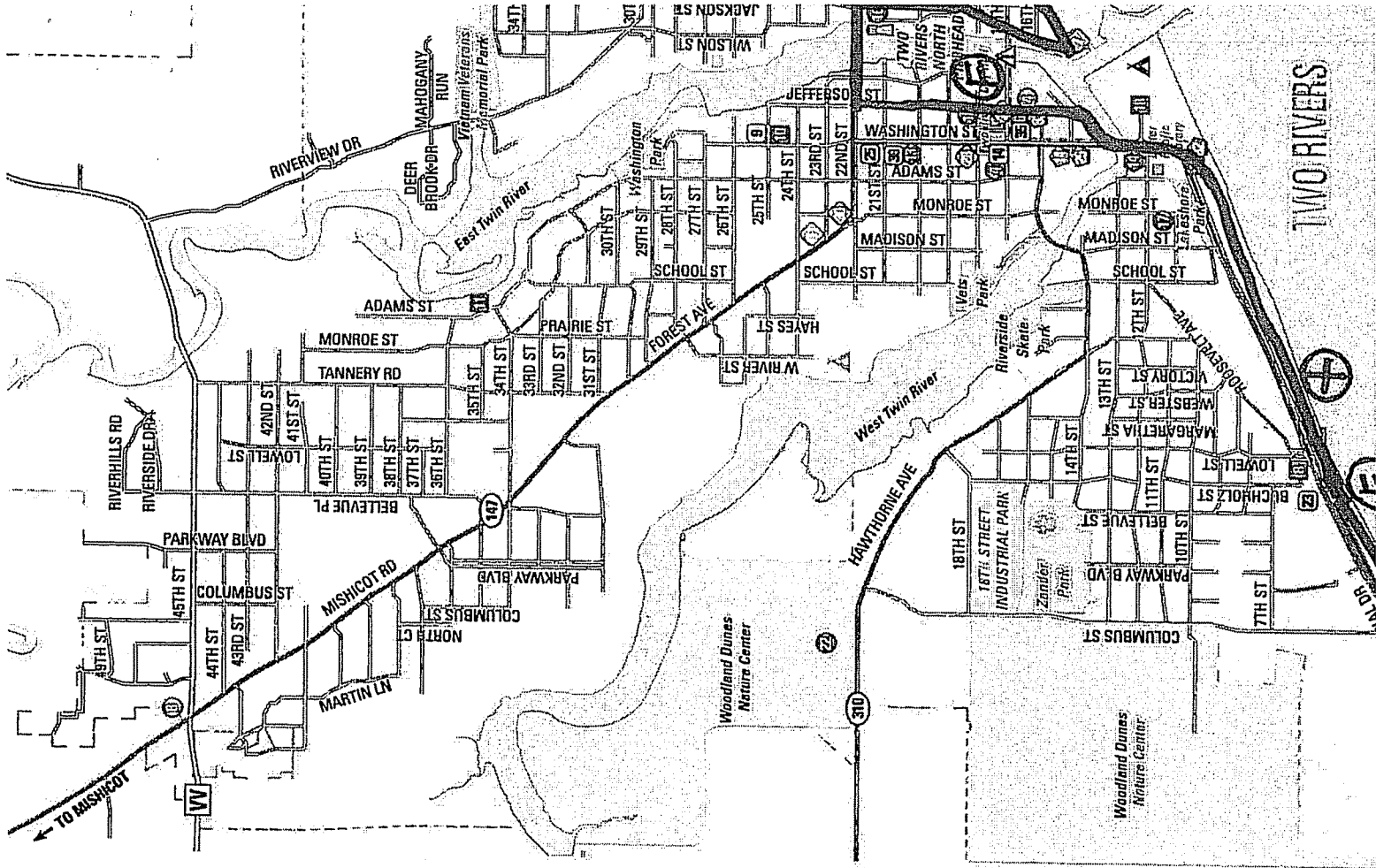
Signature of Applicant: 

Date: 1/2/14

COMMITTEE RECOMMENDATION: _____ DATE: _____

COMMON COUNCIL APPROVAL: _____ DATE: _____

DID COMMON COUNCIL WAIVE FEES & REIMBURSEMENT ? Yes No



HFM Maritime Marathon

June 22, 2014

- R** Relay Exchange
- ⊕** Medical Station

R

⊕

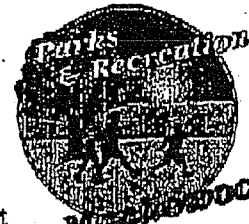
RECEIVED

FEB 19 2014

DEPT. OF PUBLIC WORKS



Mariner's Trail Special Use Trail Permit



The Manitowoc and Two Rivers Parks and Recreation Departments reserve the right to permit events conducted on the Mariners Trail and facilities. Please complete the following information and submit it to either Parks and Recreation Office. There is no charge for a trail permit, and events will be considered on a case-by-case basis. Considerations for permitting a trail event include type of event, day of event, and other requests within 30 days of the event, as well as other considerations that may affect the public's use of the trail.

All special events or activities approved by the permit panel (Two Rivers & Manitowoc Park & Recreation Directors) can be reserved 12 months in advance including a renewal, "First Right of Refusal" clause. Set up, clean up and take down and other services provided by a City staff will be billed at the hourly rate currently charged by the Park & Recreation Department. Event promoter must provide a copy of liability insurance naming both cities as co-insured at least 10 days prior to the event. Permits do not allow "exclusive use" of the trail and the general public must be allowed to share the permitted areas.

Name: HFM Maritime Marathon
Holy Family Memorial Street Address: 2300 Western Ave
City: Manitowoc State: WI Zip: 54220 Phone: _____

Date of Event: 6/22/14 Facilities Requested: _____

Purpose of Application: Marathon Start time: 7:00 AM End time: 1:00 PM
Will alcoholic beverages be served? Yes No if yes, what type? _____
(Please note: Glass beverage containers not permitted in TR public parks - Ord. 7-1-10)

This agreement is made and entered into by and between the Cities of Two Rivers and Manitowoc, Wisconsin, hereinafter called "City" and the above-named individual, hereinafter called "Permittee." The parties agree as follows: Bookings must be made no earlier than 12 months in advance. The Permittee understands his/her responsibility is to set up, clean up and restore premises within the time period listed above. Permittee is required to provide event liability insurance naming the Cities of Two Rivers and Manitowoc as co-insured.

Limitation of Use: Permittee agrees that the number of persons on the rented premises during the rental period shall not exceed the capacity of the facility and that no intoxicating liquor or fermented malt beverages shall be served to minors. Permittee agrees to use premises rented for the purpose stated above and no other. In the event this Limitation of Use is not complied with, Permittee shall be charged and agrees to pay a fee of \$200.

Permittee agrees to abide by the rules and regulations contained in this agreement.

[Signature] _____ Date: 1/14/14

[Signature] _____ Date: 2/20/14

[Signature] _____ Date: 2-20-14