

CITY OF MANITOWOC

WISCONSIN, USA www.manitowoc.org





Kimberly Brockman American Red Cross 2131 Deckner Ave. Green Bay, WI 54302

RE: American Red Cross Blood Drive - Lincoln Park Cabin 1 - January 11, 2021

Dear Ms. Brockman:

Your request to hold your Blood Drive event at Lincoln Park Cabin 1 on January 11, 2021 was acted upon by the Special Events Committee at the meeting of November 18, 2020.

At said meeting the Committee approved your request.

Please encourage social distancing and proper handwashing and sanitizing.

When listing sponsors for your event, we ask that you consider listing the City of Manitowoc since some or all fees have been waived for the event.

If you have any questions, please contact me at 686-6950.

Very truly yours,

Deborah Neuser

City Clerk

DN:mrk

cc: Special Events Approval Group

SPECIAL EVENT COMMITTEE APPROVAL FORM

MEETING DATE: 11/18/2020 EVENT NAME: Blood Drive ORGANIZER: American Red Cross - Kimberly Brockman E-MAIL ADDRESS: kimberlyb@aol.com **EVENT DATE: 1/11/2021**

NEW OR RECURRING: Recurring

LOCATION/DESCRIPTION: Use of cabin 1 for a blood drive

COMMITTEE CONCERNS:

COMMITTEE DECISION:

DENY

COUNCIL ACTION REQUIRED:

ITEMS TO INCLUDE IN LETTER:

When listing sponsors for your event, we ask that you consider listing the City of Manitowoc since some or all fees have been waived for the event.

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 CITY COMMESCAING (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.

NOV 172020 ENGINEERING

ALL QUESTIONS MUST BE ANSWERED

Name	of event: Blood drive
1.	Name of club/organization making request American Red Cross/Manitowoc Co
	Address 2131 Deckner Ave Green BAY Telephone 920-241-5949
2.	Names of club officers: Name Address Telephone
	President Schedule Supervisor Jessica Babrant 920-241-5949
	Sceretary Kimberly Brockman - 920-309-2052
	Treasurer
3.	Facility requested: CabiNI - Lincoln Park
	Equipment requested:
4.	Specific dates and hours facility/equipment will be used: Date(s)
s.	Please explain your request, as to what fees you desire waived or reduced and reasons.
5.	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 X
l .	If #7 is "yes," explain and list specific charges

9.	Do you wish to meet personally with the Committee to discuss this request? Yes No		
10.			
Signe	Kimbonly Brockman (ARC) CV	LYP Date 11/4/2020	
Picase	e attach any additional information which you feel will assist	the committee in evaluating your request.	

When completed, return this form to the City of Manitowoe - Dept. of Public Infrastructure
900 Quay St., Manitowoe, WI 54220 · Phone 920-686-3580 · Fax 920-686-6525 · E-mail parksadmin@manitowoe.org