PARKS & RECREATION DEPT. SPECIAL EVENT APPROVAL FORM

MEETING DATE: 8/12/2026
EVENT NAME: Manitowalk vs. ALS
ORGANIZER: Tina Kocourek - ALS WI Chapter
E-MAIL ADDRESS: tinakocourek@gmail.com
EVENT DATE: 8/15/2026 **NEW OR RECURRING:** Recurring

LOCATION/DESCRIPTION: Fundraising walk on the sidewalks from Time Out to Michigan Ave, North 23rd, and back.

CONCERNS:

RECOMMENDATION TO APPROVE/DENY EVENT: Approve event.

WAIVER OF FEES RECOMMENDATION: Not requested

COUNCIL ACTION REQUIRED:

ITEMS TO INCLUDE IN LETTER:

Copy to: Clerk

Location *

Time out sports bar

Date *

08/15/2026

End date if multiple day event and additional dates if applicable.

Event time *

09:M AM

Until

02:M PM

3/23

Event time *

09:M AM

Until

02:M PM

Enter a valid time

Setup start time *

08/15/2026 form.jotform.com :M AM

1 2 ABC 3 DEF

4 5 6

3/22

Name of Applicant *

Tina kocourek

Organization Name *

Als wi chapter

Address *

4511 east whitetail court

Street Address

Street Address Line 2

Manitowoc

City

Wi

State / Province

3/24

(920) 242-7298

On-site contact & phone number *

9202427298

Security name & phone number

Tina 9202427298

Event description *

Walk 3miles on sidewalk time out to Michigan to 23rd to timeout

Include event features, purpose, and relevant information.

Estimated total attendance *

200

3/25

organization and acknowledge that I have received, read and understand the Special Events Guidelines and 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.

Applicant date of birth *

05-15-1972

Sign *

Tina

First Name

Kocourek

Last Name

Save

Submit

3/26