



SPECIAL EVENT PERMIT APPLICATION

A Special Event refers to an event that takes place on parks & Recreation property that is open to the public, or where an admission fee is charged, or food/alcohol is served or sold. This application to the Park Board should be submitted at least six weeks prior to the event; or eight weeks if requesting alcohol service or sales. The Park Board meets the third Tuesday of each month. The request MUST be received one week prior to the Park Board meeting to be included in agenda for approval.

APPLICANT INFORMATION

| | | |
|---------------------------------------------------------------------------------------------------|----------|-------------------------------|
| Name of Applicant/Event Organizer: | | |
| Organization/Production Company: | | |
| Federal Tax ID or 501©3 #: | | (attach current verification) |
| Address: | Apt/Ste: | |
| City: | State: | Zip: |
| Email: | Phone: | |
| Event Day On-Site Contact: | Cell: | |
| Event Sponsor: (Are you, the applicant, organizing this event on behalf of another organization?) | NO | YES |
| Only fill out if you answered YES above. | | |
| Name of Organization: | | |
| Sponsoring Organization Contact Name: | | |
| Address: | Apt/Ste: | |
| City: | State: | Zip: |

EVENT INFORMATION

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Event Name: | | |
| Location/Facility Requested (Check all that apply): | | |
| <input type="checkbox"/> Schwiebert Riverfront Park <input type="checkbox"/> Main Stage & Great Lawn <input type="checkbox"/> Observation Shelter <input type="checkbox"/> Triangle Lawn | <input type="checkbox"/> Sunset Park <input type="checkbox"/> Longview Park <input type="checkbox"/> Douglas Park | <input type="checkbox"/> Lincoln Park <input type="checkbox"/> Band Shell & Shelter <input type="checkbox"/> Gazebo <input type="checkbox"/> Wedding Plaza |
| <input type="checkbox"/> Martin Luther King Jr. Park <input type="checkbox"/> Terry Brooks Performance Stage & Shelter | | |
| Event Date(s): | Event Time: | to |
| Set-Up Date(s): | Set-Up Time: | to |
| Tear-Down Date(s): | Tear-Down Time: | to |
| Estimated Number of Attendees/Participants: | | |
| Will this event interfere with/impede normal use of the area by the public? | NO | YES |
| What actions will be taken to reduce impact to others? _____ | | |
| Previous Year Date/Location: Has this event been previously held? | NO | YES |
| Location: | Date: | |
| Do you plan to charge admission/participation fees? | NO | YES (Please fill out info below) |
| Fee Per Adult: \$ | Fee Per Child: \$ | or General Admission: \$ |
| Who is the recipient of the monies collected? | | |
| Additional Fees may apply with admission/participation fees. | | |

EVENT INFORMATION Cont.

Event Description:

Provide a detailed description of your event. Additional information may be attached.

EVENT FEATURES

All event features are subject to the approval of the Park Board. Additionally, certain features such as street closures and those mentioned below may require separate permits from the City of Rock Island. For more information regarding City of

FOOD & NON-ALCOHOLIC BEVERAGES

Are you requesting permission to **sample** food and/or beverages?

- Yes (Event Participants only) Yes (to the General Public) No

Are you requesting permission to **sell** food and/or beverages?

- Yes (Event Participants only) Yes (to the General Public) No

IF FOOD IS DISTRIBUTED OR SOLD, THE CITY HEALTH INSPECTOR MUST BE CONTACTED AT 309-732-2915.

If vendors/caterers are known please list:

Indicate the number of vendors and type of stand for each (tent/trailer/grill/table only/truck/etc.):

Beverages: _____

Food: _____

Merchandise: _____

Info/Registration: _____

Other: _____

ALCOHOL

Alcohol for Special Events is only allowed on park property when a permit has been issued and the alcohol being provided is by a company that has appropriate licenses from the State of Illinois Liquor Commission, and has been approved by the Rock Island Park Board and given a license from the City of Rock Island. Request must be given to the Park Board eight-weeks in advance. Requests must be given to the City of Rock Island at least 30 days in advance. Approved copy of the appropriate licenses must be submitted to the Park Board within 30 days of the event. Please plan accordingly by **submitting all appropriate paperwork at least eight week prior to your event date** to allow the Park Board and City of Rock Island time to make recommendations to ensure participant and public

Are you requesting permission to have beer or wine at your event? NO YES (Please continue)

- Serve Sell **Please attach a detailed plan for serving alcohol and preventing underage drinking.**

Proof of dram show insurance coverage will be required.

Who will be selling/serving the alcohol? _____

Additional charges may apply with Serving/Selling Alcohol.

EVENT FEATURES

MERCHANDISE

Are you requesting permission to **sample** merchandise?

- Yes (Event Participants only) Yes (to the General Public) No

Are you requesting permission to **sell** merchandise?

- Yes (Event Participants only) Yes (to the General Public) No

ELECTRICAL (Additional fees may apply)

Indicate the number of electrical outlets that will be needed, and attach a description or site map:

Electrical outlets needed: _____ Location: _____ Purpose: _____

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AMPLIFIED SOUND (Additional fees may apply)

Are you requesting permission to have amplified sound? NO YES (Please continue)

Hours of Amplified Sound: _____ to _____

Description (Please describe purpose and plans for amplified sound)

Will music/sound be monitored for language content? NO YES

Are you planning to provide live entertainment as a feature of your event? NO YES (Please continue)

Description: _____

Will you provide sound equipment or rent from Rock Island Parks & Recreation? (Renting only available to Schwiebert Park)

- Provide Rent Includes 2 speakers, 2 microphones with stands, and adaptor for CD player, MP3 Player or IPOD (players not included). System is designated for speaking and solo artists; not suitable for band amplification.

How will you be using the System? _____

VEHICLES

The Park Board may consider granting permission for the delivery of equipment and supplies for event set-up and tear-down. Additional Fees apply.

Driving and/or Parking vehicles on grass/athletic fields is STRICTLY PROHIBITED.

Are you requesting permission to operate staff/supply vehicles on Park Board service roads for delivery of equipment and supplies? NO YES (Please continue)

Cars: _____ # Trailers: _____ # Buses: _____ # Semi Trucks: _____

Golf Carts: _____ # Other: _____ Describe: _____

EVENT ADDITIONS

If you're planning to erect, install, or use any of these structures, describe below. A separate sheet with additional details may be attached.

Will your event include the installation of **STAGES/PLATFORMS**? NO YES (Please continue)

Description: _____

Will your event include the use of **PORTABLE TOILETS**? NO YES (Please continue)

Required at MLK Jr. Park & Park Board may require at other locations.

Number of Toilets: _____ Locations: _____

Will your event include the use of **DUMPSTERS** or Garbage Control? NO YES (Please continue)

Park Board may require, Garbage May Not Overflow at any time during your event.

Description: _____

Are you requesting that your event include the installation of **FENCING**? NO YES (Please continue)

Required at any park if Serving Alcohol.

Describe purpose and location: _____

Will signage be used in the Park and what type: _____

Will your event include the use of **OTHER STRUCTURES OR FEATURES** no identified above?

(Inflatable's, Fireworks, Barricades, Bleachers, Table/Chairs, Etc...) NO YES (Please continue)

Description: _____

Will your event require the use of **TENTS OR CANOPIES**? NO YES (Please continue)

Permit required for tents over 1,000 square feet. Additional fees may also apply.

Number of Tents: _____ Size: _____ x _____

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RENTAL OF EQUIPMENT

Rental of Chairs, Tables, Stanchions & Fences are **ONLY** available at Schwiebert Riverfront Park.

Are you requesting rental of any of the following from RI Parks & Rec? NO YES (Please continue)

Chairs: _____ # Tables: _____ # Stanchions: _____ # of Fence Sections: _____

(90 Available)

(10 Available)

(20 Available)

(60 Available)

(Each 8' wide x 4' high)

(Required if serving alcohol)

Attach a Site Map if you plan to include any of the previously mentioned features at your event. The Site Map should indicate the relative location of the following: all sources of amplifies sound and direction of sound, tents and canopies with sizes, stages, promotional cars, inflatable's, portable toilets, dumpsters, fences & barricades, and other structures; proposed driving paths for all equipment and supply vehicles, location of vehicles you wish to retain on Park Board property during the event; locations a alcohol, food and merchandise services/sales; and proposed street closures. Site Maps are subject to the approval of the Park Board.

EVENT PLANS

ADVERTISING AND MARKETING

Please note that all costs incurred promoting and marketing events prior to the insurance of an approved Special Event Permit from the Rock Island Park Board and Changes/modifications relative to the event from the Park Board/or City of Rock Island is at the sole expense of the Event Organizer.

How will your event attendees be notified or invited to the event? _____

Will your event be publicly advertised? NO YES (Please continue)

Description: _____

Will your event have a Webpage and/or Social Media? NO YES (Please continue)

Link: _____

Link: _____

SECURITY (Park Board may require)

Have you made provisions for on-site security services? NO YES (Please continue)

Security Company: _____

Contact Name: _____

Address: _____ City: _____ St: _____ Zip: _____

Email Address: _____ Phone: _____

Event Day Cell #: _____ Insurance Company: _____

MEDICAL SERVICES (Park Board may require)

Have you made provisions for on-site medical services? NO YES (Please continue)

Medical Company: _____

Contact Name: _____

Address: _____ City: _____ St: _____ Zip: _____

Email Address: _____ Phone: _____

Event Day Cell #: _____

STREET CLOSURES OR USE OF PUBLIC WAY

If you are requesting the closure of/use of park roads you must receive permission from the Park Board. For closure of public city street or public city way (including sidewalks or street closing) you must obtain approval and all necessary permits from the City of Rock Island. For more information, call 309-732-2010. If your event is a run, walk or other activity in which participants will be following a course, attach a map with a written description of the proposed

Will you be requesting permission from the City of Rock Island to close a street/other public way for your event? NO Yes (Please continue)

Location Description: _____

Will you be requesting permission to close a park road from the Rock Island Park Board? NO Yes (Please continue)

Location Description: _____

PARKING AND TRANSPORTATION PLAN Parking is only allowed in parking lots and designated street parking.

Have you made provisions for safe transportation and/or parking? NO Yes (Please continue)

Description: _____

INSURANCE "Certificate of Insurance in the amount of \$1,000,000 worth of General liability coverage that name the Rock Island Park B Board as an additional insured" required by Park Board. ***Certificate required AFTER event approval by Park Board - Submit to Events Manager

Is your agency covered by Liability Insurance? NO Yes

Please attach letter of verification is applicable.

POLICIES

- Alcohol is not allowed in the park without proper documentation and fees.
- No set-up or decorating may take place until RI Parks & Rec staff is present.
- Refundable damage deposit is required for special event along with a valid credit card on file.
- Applicant is responsible for set-up and tear-down of all chairs, tables, equipment and decoration, as well as clean-up and taking trash to dumpster. Failure to do so will result in additional fees.
- Parks Staff will set up sound system (if rented) and applicant will appoint person to operate system.
- Prohibited: confetti, bird seed, rice, silk petals, or any other material that may cause litter.
- In case of inclement weather, equipment rental fees will be refunded. Park rental fee is non-refundable.
- Stakes may not be used in lawn due to irrigation system.
- Failure to clean up park after use may result in additional clean-up fees.
- Glass bottles are not allowed in the park for safety reasons.
- Cancellation policy: With at least a 30-day notice, the applicant will receive a refund of fees, less a cancellation of a \$50 fee.

With at least a 15-day notice, the applicant will receive a refund of fees, less a cancellation of a \$100 fee.

Within a 15-day notice, no refunds will be issued.

Inclement Weather cancellations must be discussed with Parks Special Event Manager.

SIGNATURE

Approval of this application will reserve for the applicant the requested event date/place, providing all requirements outlined by the Special Event Policy in writing to the applicant are met.

GENERAL CONDITIONS

Applicant agrees: to bear all costs of policing; cleaning and restoring park property used pursuant to the permit, to reimburse the Park Board of all such costs incurred by the Park Board; to pay by credit card on file if damage cost are greater than the refundable deposit; to indemnify the Park Board and hold the Park Board harmless from any liability to any person resulting from damage or injury occurring in connection with the permitted event proximity caused by the action of the applicant, its officers, employees, or agents or any person under applicant's contract; to limit all activities conducted on Park Board property to the terms of the permit; and that failure to abide by the terms of the permit or any other applicable laws, rules or regulations may result in revocation of the permit, retention of all or a portion of the damage deposit, fines or result in revocation of the permit. The undersigned agrees by the execution hereof to indemnify and hold harmless the Rock Island Park Board against all liabilities, costs, and expenses which may arise in consequence of the granting of this permit.

I do solemnly swear (or affirm) that all answers given and statements made on this application are full and true to the best of my knowledge and beliefs. I acknowledge that I have received, read and agree to the terms of the event and facility rules and the Rock Island Park Board Code of Ordinances and I agree to abide by them.

The Undersigned has full authority to represent the sponsoring organization:

Printed Name:

Signature:

Date:

PAYMENT

Refundable damage deposit and valid credit card is required to secure requested date(s). All applicable rental fees are due no later than 30 days prior to event date. Failure to submit fees may result in denial of rental. ***Cancellation Policy - All cancellations must be made **in writing** not less than 72 Hours in Advance. With proper notice, applicant will receive a refund minus a \$50 cancellation fee. Failure to provide 72 Hours notice will result in a loss of 50% of the rental fee along with damage

REQUIRED CREDIT CARD INFORMATION

Type of Card: VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Card Number: _____ Exp Date: _____

Security Code: _____ Name on Card: _____

REFUNDABLE DAMAGE DEPOSIT REFUND TO:

Name/Organization: _____

Address: _____ City: _____ ST: _____ Zip: _____

If a refund is applicable and Park Board clears applicant after event, a refund will be processed within 30 days of event.

RETURN COMPLETED APPLICATION AND SUPPORTING DOCUMENTS TO:

RIFAC • Attn: Dan Gleason • 4303 24th Street • Rock Island, IL • 61201

FOR QUESTIONS PLEASE CALL ROCK ISLAND PARKS AT 309-732-7275 OR EMAIL GLEASON.DANIEL@RIGOV.ORG

OFFICE USE

Refundable Damage Deposit: \$ Cash Check #: _____ CC Date: _____

Rental Fees: \$

Total Due: \$ Cash Check #: _____ CC Date: _____

Special Events Manager Approval _____ Date _____

Division Manager Approval _____ Date _____

Director/Park Board Approval _____ Date _____

Approved Denied
 Deposit
 Alcohol
 Alcohol Paperwork
 Approval Letter Sent
 Insurance Paperwork Received
 Total Fees Received
 Permit Sent