

**Memorandum
Office of the City Clerk**

To: Thomas Thomas, City Manager
Subject: Washington Jr. High School 5K Event
Date: June 17, 2013



Attached is an Activity application, letter and a map from Kathy Evanchyk on behalf of Washington Junior High School. Ms. Evanchyk is requesting to hold a 5K road race on Saturday, September 7, 2013 from 8:00 am to 10:00 am. The race will begin and end at Rock Island High School Stadium.

The 5K race will begin at Rocky Stadium; they will proceed north to 18th Avenue towards Washington Jr. High School where they will turn around at 33rd Avenue and then follow the Labor Day Parade route back to Rocky Stadium.

The purpose of this race is for a fundraiser for the Washington Jr. High School Reward Fund.

They will be contacting the Police Department for traffic control. The certificate of insurance is forthcoming.

RECOMMENDATION:

It is recommended that Council approve the event for Washington Jr. High School.

Submitted by: Aleisha L. Patchin, City Clerk

Approved by: Thomas Thomas, City Manager

June 17, 2013

City of Rock Island council members,

My name is Kathy Evanchyk and I am a teacher at Washington Junior High School in Rock Island. WJHS has over 500 students in the two grades and they are wonderful. They work hard and we like to reward them with dances, field trips, and other fun events.

I would like to organize a 5k fundraiser for the WJHS reward fund. It would be at 8am, the morning of September 7, 2013. The run would start at the Rocky stadium, go north to 18th Avenue towards WJHS, turn around near WJHS and follow the parade route back to the stadium where participants would finish the course with one lap on the track. The post party and awards ceremony would take place inside the stadium.

Washington students would be involved in this event in a multitude of ways. Some will run/walk the race with their families, others will help with the organization and others will volunteer their time and talents to make the run a success.

The Rock Island school district has been notified of our intent for a fundraiser and we are in the process of securing an activity permit with the city. I have run in many road races, but have never organized one. Therefore, I appreciate any help that you might offer. You may contact me at Kathy.evanchyk@risd41.org or (563) 676-7647.

Thank you,

Kathy Evanchyk
WJHS math teacher



ROCK ISLAND ILLINOIS

CITY OF ROCK ISLAND LICENSE APPLICATION ACTIVITY PERMIT

Type of Activity: (Check Appropriate Activity)

Table with 6 columns: Parade, Run, Walk, March, Bicycle Ride, Other (specify below). Run and Walk are checked.

Day/Date of Activity: Saturday September 7, 2013

Event Start Time: 8am Event Ending Time: 10am

Set-up Start Time: 7am Clean-up End Time:

Sponsor Name/Organization: Washington Junior High
Address: 3300 18th Ave Rt
Telephone: 793-5915

Contact Person: Kathy Evanchyk
Address: 514 W. Hayes Daw.
Telephone: (563) 322-5897 or (563) 676-7647

Estimated number of: (Put Number in Appropriate Boxes)

Table with 7 columns: Bands, Floats, Vehicles, Wheelchairs, Participants, Horses, Other (Specify). Participants is 200.

Number of volunteers available for traffic control: (Contact Police Department to arrange for traffic control. Telephone No. 732-2402.)

Tail car provided by sponsor? X Yes No

Ambulance/first aid provided by sponsor? X Yes No

Route for activity: Detailed description and map of city streets and property involved in activity must be attached to this application. Starting and ending locations as well as direction of travel need to be clearly indicated.

Are any State-owned streets involved? Yes No X Unknown

Identify State-owned streets, if known.

Does sponsor provide barricades? X Yes No

Are barricades required from City? Yes No Qty: _____

Insurance requirements: In submitting this application, the undersigned agrees to provide certification of Liability Insurance Coverage for this event in an amount not less than \$300,000.00 for any person, and \$500,000.00 for any one accident, with the City of Rock Island being listed as additional insured for claims or damages which may arise out of said event. The undersigned further agrees to reimburse the City of Rock Island for any and all costs that exceed \$200.00 for the use of City streets and personnel.

All required insurance papers must be attached to this application. Permit cannot be issued without proof of insurance.

Kathleen Eranchyk
Signature of Applicant

6-4-13
Date of Application

Note: A copy of your application will be submitted to the Police Department so they will be able to assist you with any needed traffic control.

Do not write below line – to be completed by City Clerk's Office

Route map and/or information included: Yes No

Insurance information included: Yes No *Forthcoming*

City Council approval: _____

City Clerk approval: _____

License / Permit number: _____

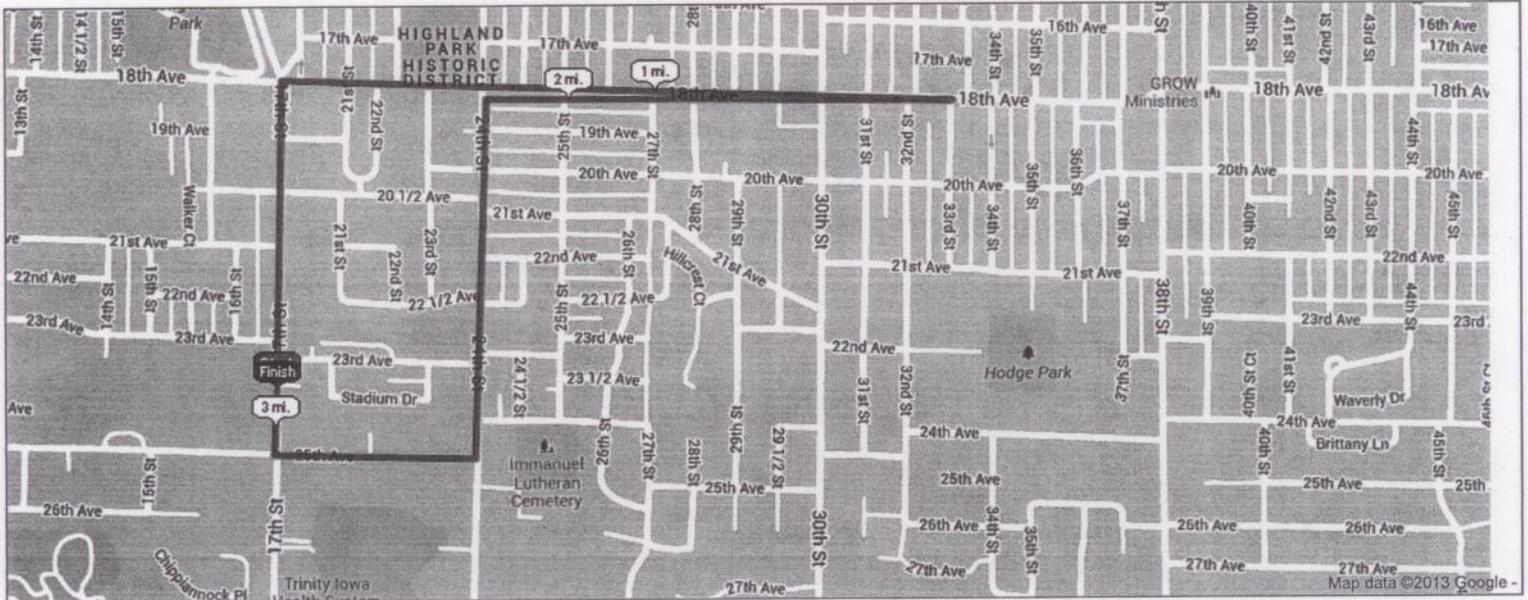
License Printed: _____ License Delivered: _____

Return completed application,
Insurance Certificate, Map and any other additional documents to:

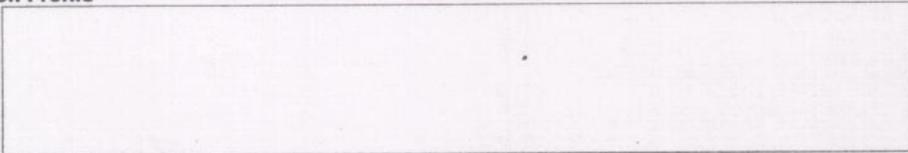
City Clerk's Office, 1528 3rd Avenue, Rock Island, IL 61201

Call 309-732-2010 if you have questions.

Create a New Route



Elevation Profile

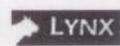


Total climb: 0 feet / 0 m

Total elevation change: 0 feet / 0 m



St. Vincent Sports Performance



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