SPECIAL EVENT APPLICATION CHECKLIST

is to be in	application is considered complete, the following information cluded. Please initial each line acknowledging each item is not the application:
	Completed Special Event Application form
	Site Map
	It is a minimum of 2 months prior to your event

SPECIAL EVENT APPLICATION FORM

Part A – Booking Information

Name of Organization		
Address		
City/Province		
Postal Code		
Type of Organization	Non-Profit Community Asso	
Contact Name		
Phone Number	Home	Cell
	Work	Email Address
Alternate Contact Name		
Phone Number		
		Email Address
Part B – Event Information		
Type of Event (check all that	t apply)	
Concert/Performance	Demor	stration/Parade
Party/Reception	 Run/W	alk/Marathon
Wedding Ceremony	Hot Air	Balloon
Fireworks Display	Inflatal	oles (activity bouncer)
Petting Zoo	Conces	sions (food/refreshments)

<u>Detailed Description of the Event</u>				
Location				
Anticipated Attendance				
Event Date/Time				
Set up Date/Time				
Take Down Date/Time				
	(
Refuse Collection Bins				
Washroom Facilities	_ (on site? Etc.)			
Part C – Communication Plan				
Event program information, such as schedule of entertainment and availability of concessions etc. is to be shared with any residents or businesses located adjacent to the event. Information must include event dates, times and road closures or restrictions.				
Provide a copy of your communication and method that your organization will use to distribute the event information:				
Community Association Newsletter _ Letters	Posters/Flyers Other			

<u>Part D – Event Organizer's Additional Responsibilities</u>

Event Security – Provide a detailed description of how and who will be providing for the event (volunteers, security company etc.)		
Parking Plan – Provide a detailed description of where event staff, volunteers, participants and spectators will park during the event		
Traffic Control – Provide a detailed description of traffic control measures including barricades		
Emergency Vehicle Access		
Site Cleanliness (during & following the event)		
Public Washrooms (on site, delivery, how many?)		

Damage (Public Property) – Any damage to Public property is the

responsibility of the event organizers to pay for the repair.

Part E – Noise Guidelines for Special Events

Noise bylaw hours are: Monday to Sunday – 8AM – 10PM

Event organizers are responsible for the monitoring and control of noise resulting from their event. These guidelines are intended to assist organizers in ensuring the noise from the event does not intrude unreasonably on the public living in the area.

1. Event organizers shall designate a responsible individual who is available by phone on a 24 hour basis and who has the authority to respond appropriately to complaints regarding the event. The contact name, phone number, event name, dates, times and location will be provided to any member of the public wishing to contact the event organizers directly.

Part F – Signature and Authorization

I have read and will comply with all Event requirements:
Event Contact Signature
Event Contact Name (print)
Date

RELEASE SPECIAL EVENT

This is a release provided by the person or persons listed on this form (the "Releaser") to the District of Lakeland No. 521 (the "District"). This release is provided in return for the District permitting the temporary closing of streets as requested by the Releaser.

The Releaser hereby releases and forever discharges the District, including its officers, employees and agents, of and from all manner of actions, causes of actions, claims or demand, for or by reason of any loss resulting from loss, damage or injury to person or property or both arising out of or in connection with the temporary closure of:

	between (house#) and
(house#)	in the District	of Lakeland No. 521.
The above noted area s	hall be closed to vehicula	ar traffic between the
hours of	andoi	າ
NAME	ADDRESS/PHONE #	SIGNATURE

APPEAL FORM For Special Events

Date:	•
Appellant information:	
Name:	
Address:	
Home Phone	
Cell Phone	
Email address	
Reason for Appeal:	
Appeals will be forwarded onto Dist	rict Council for decision.
Name of Applicant	 Signature of Applicant