

PARK EVENT PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

EVENT INFORMATION

Name of Event Madison Garden Marathon, 4 mile run / walk

Event Organizer/Sponsor Children's Voice Inc.

Is Organizer/Sponsor a 501(c)3 non-profit agency? Yes No

If Yes, provide State of Wisconsin Tax Exempt Number _____

Address 4830 Valor Way

City/State/Zip Madison, WI, 53718

Primary Contact Jill Nyland FAX _____

Work Phone (608) 577-1867 Phone During Event (608) 577-1867

E-mail jillnyland@ymail.com

Website Childrens Voice Inc. com

Secondary Contact _____

Work Phone _____ Phone During Event _____

E-mail _____

Annual Event? Yes No

Charitable Event? Yes No

If Yes, name of charity to receive donations: Children's Voice Inc

Estimated Attendance 600 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Public Amplification: Hours 745 to 830 am 10am - 1pm Yes No

Park Requested Olbrich Park

Shelter Reserved by Event Organizer Yes No

N/A Shelter Bathroom by lakeland Ave

EVENT DATE(S)/SCHEDULE Set-up 9/12

Date(s) of Event (including set-up and take-down) _____ Rain Date(s) N/A

Event Start Date(s)/Time(s) 9/12 114 12pm Set-Up Date(s)/Time for Event _____

Event End Date(s)/Time(s) 9/12 114 11pm Take-Down Time _____

Does this require time in the park the day before your event? Tent set up. Yes No

APPLICATION SIGNATURE event 9/13

The person/group named in this application will be responsible for the conduct of the group and for the condition of the reserved park area. This permit is subject to all Municipal Ordinances as defined by the City of Madison, in addition to all rules and regulations governing the City's Parks Division. The applicant agrees that during the use of the park facility, the sponsoring organization will not exclude anyone from participation in, deny anyone the benefits of, or otherwise subject anyone to discrimination because of the person's race, color, creed, national origin or handicap.

The applicant has read the Park Events Application packet. The applicant has included all of the appropriate permit applications and materials for this event.

I hereby certify to the best of my knowledge that the information and statements contained in this application are complete and true. I understand that failure to report components of this event/activity may result in the loss of deposit, revocation of permit and/or failure to secure future permits.

Signature Jill Nyland

Date 1-15-14

PARK EVENT ADDITIONAL PARK PERMITS CHECKLIST

ADDITIONAL PERMIT REQUIREMENTS

Event Organizers are responsible for obtaining all permits required for an event in the City of Madison. You must include all pertinent information for those permits with this application. Please indicate the permits that apply to your event. Submit the required Park permit applications with this Parks Event application packet. Check and date additional permits that are required for your event. Parks staff will review your application and advise if additional permits are required for the event.

Notification Requirements

Have you done the appropriate notifications?

Alderperson Name/Date: Notified Marsha A Runner 1 1-15-14 N/A Yes
 NA Name/Date: Notified _____
 Traffic Engineering Name/Date: Notified Tom Mohr 1 1-15-14

Park Permits

Applications included in this packet and at www.cityofmadison.com/parks.

- Vending Permit** - All vendors must return their permit application at least 30 days prior to the event.
- P.A. Permit**
- Beer/Alcohol Selling Permit**
- Temporary Structure Permit** - for tents, inflatables, stages, dunk tanks, trailers, etc.

Street Use Permit

Included in this packet, but must be submitted separate from the Parks Event application

- Street Use Permit** - necessary to close a city street, sidewalk and/or request special street parking considerations. Call 266-6033 with questions. Please indicate date you submitted Street Use Permit application 1-9-14

Other City Permits

- Temporary Restaurant Permit** - required if food or beverages, other than prepackaged items, will be sold or served at an event. A permit application is available online at www.publichealthmdc.com or you may pick up an application at the City Clerk's Office, at 210 MLK Blvd, Room 103, (608) 266-4601.
Date Temporary Restaurant Permit Application Submitted 1-15-14
- Parade Permit** - may be required of a run, walk or bike ride event. From the Police Department, www.cityofmadison.com/police/parade.htm.
Date Parade Permit Application Submitted 1-3-14
- Temporary Class "B" Retailers License** - required if your event will be selling beer/alcohol. You may pick up an application at the City Clerk's Office, at 210 MLK Blvd, Room 103, (608) 266-4601, www.cityofmadison.com/clerk.
Date Class "B" Permit Application Submitted _____
- Fireworks Permit** - From the Fire Department, (608) 266-4457, www.cityofmadison.com/fire.
Date Fireworks Permit Submitted _____
- Burn Permit** - For bonfires. From the Fire Department, 266-4457 or online at www.cityofmadison.com/fire.
Date Burn Permit Submitted _____

County/State Requirements

Not all of these will be pertinent to your event.

- Diggers Hotline (800-242-8511)** must be contacted whenever a tent or temporary structure will be erected and the ground will be penetrated by stakes, tools, or equipment.
- For utility hookups, signage, zoning, etc and to assure that all City regulations are satisfied, please contact the Building Inspection Unit at (608) 266-4551. Be prepared to specifically explain your Community Event in detail.
- The Dane County Sheriff's Department ((608) 266-4970) should be contacted whenever any Community lakes patrol is required.
- DNR Water Regulations and Zoning should be contacted ((608) 275-3266) regarding any water resource implication, such as the use of fireworks, water ski ramps, etc. There may be instances when your event plans may require a Community permit from the DNR.
- The Pedestrian/Bike Commission within the City Department of Transportation must be contacted ((608) 266-4761), if an event will affect the Pedestrian/Bike trails.

PARK EVENT MARKETING INFORMATION

Conditional approval of the event is required **before** promoting, marketing or advertising the event.

How will this event be marketed, promoted, or advertised? Facebook, Active.com
Children's Voice Inc, Signs, flyers, Banners, Radio, Billboard ^{Possible}

Will there be live media coverage during the event and where will the media vehicles be parked? NO

PARKS DIVISION CALENDAR OF EVENTS

The City of Madison Parks Division provides a calendar of events on the internet, in a number of publications and at kiosks located throughout downtown. The information from your permit application is considered public and is used in developing the calendars.

Your event will only be included on the calendars if all permits and applications are approved 60 days in advance (for printed form of calendar) and 30 days in advance (for internet calendar) and your event is open to the public. If this section is not filled out, we will assume you do not want to be included on the calendars.

Official Name of Event Madison Garden Marathon, 4 mile run/walk

Park Location Olbrich Park - Atwood Ave + Lake Lane

Public Contact Phone (608) 577-1867 Website childrensvoiceinc.org

Admission Cost see website - Active.com

Date of Event 9/27/14 Beginning/End Time of Event 8am - 2pm

Two sentence description of event (for internet calendar)
Run/walk along lake Monona and capital city trails to help
prevent child abuse through education, Marathon is officially
USATF Certified.

EQUIPMENT RENTAL

To assist with your Community event, the Madison Parks Division rents some equipment for use by the Event Organization. The Event Organizer must have the ability to pick up and return all equipment from Park Maintenance Facilities.

Rented from Parks Division, but picked up by Event Organizer

- Trash Barrels # _____ barrels
 Key to Shelter and Gates - Refundable deposit required

Rented from Parks Division, dropped off and picked up by Parks Division

- Dumpsters # _____

Rented from Private Vendors

- Portable toilets

Vendor Name Country Plumbers
Date or Drop Off 9/26/14

How Many? 8
Date of Removal 9/28/14

(Dates must be pre-approved by Parks Maintenance Supervisor.)

PARK EVENT VENDING PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____ Vending Permit Type: _____ Site: _____

EVENT ORGANIZER INFORMATION

Name of Group Children's Voice Inc

Contact Person Jill Nyland

Address 4830 Valor Way

Work Phone (608) 579-1182

Home Phone (608) 577-1867

Today's Date _____

A Parks Vending Permit is required for anyone who sells anything in a City Park. (MGO 8.17)

PRODUCT OR SERVICE SOLD

Please list every item sold or service provided. Attach an additional list, if necessary.

Food Item Slushies drinks, bagels, coffee, chips, candy bars
If selling food, please indicate your Temporary Restaurant License # _____

Non-Food Item _____

Services Free Beer (2 maximum) cookies, chocolate milk
with registration.

Lessons _____

DETAIL OF VENDOR SET-UP

Please include what your vending site will contain (tables, tents, electricity, etc.)

Tables, tents, coolers, generator, toasters, slushie machine
Coffee pots, condiment holder, plates + silverware (Plastic) cups
with tops

INSURANCE

All vendors must supply a certificate of insurance for product and premises insurance in the amount of \$1,000,000 in the aggregate naming the City of Madison as 'additional insured.'

Insurance Company Neckerman Ins.
Capital Insurance

Insurance Policy No. CP02322198

SIGNATURES

Vendor Signature _____ Date _____

Park Division Authorization _____ Date _____

PARKS VENDING PERMIT TYPE

- | | |
|-------------------------------------------------------------------------|---------------|
| <input checked="" type="checkbox"/> Daily | \$275.00 (NT) |
| <input type="checkbox"/> Annual | \$950.00 (NT) |
| <input type="checkbox"/> Special Event Vending Permit (up to 7 vendors) | \$845.00 (NT) |

*An Umbrella Permit for a community event may be purchased by the Event Organizer and will cover up to 7 (seven) vendors. The Event Organizer must all cover these 7 vendors under the Event Organization's/Sponsor's insurance.

Date of Event 9/27/14

Park Olbrich Park

PARK EVENT AMPLIFICATION PERMIT APPLICATION

By Ordinance, public amplification is not allowed in City Parks except by permission from the Parks Division. Permission for amplification does not exempt a group from Madison Ordinance noise restrictions. Please be considerate of park neighbors and other park users. When notifying the alderperson and neighborhood association (if necessary) about your event, be sure to include detailed information about any plans you have for amplified sound.

EVENT INFORMATION

Name of Event Madison Garden Marathon, 4 mile run/walk
Contact Person Jill Nyland Phone # During Event (608) 577-1867
Park Olbrich Park Date 9/27/14

TYPE OF AMPLIFIED SOUND

Band DJ Sound System Speeches/Announcements Karaoke
 Other (please specify) _____

Times of Sound 7:45 Am to 8:30 Am and to 10 am - 1 pm (4-hour maximum)

COST

\$100 PER EVENT

EXCERPTS FROM APPLICABLE CITY ORDINANCES

8.29 PUBLIC ADDRESS SYSTEMS IN PARKS.

- (1) No public address systems or sound amplification devices shall be used in any public park within the City of Madison except as permitted by this section. The Parks Superintendent may issue permits in accordance with this section. A permit shall not exempt the holder from the provisions of Sec. 24.08.
- (3) The Superintendent may limit the hours of operation and the location within the park of any such system or equipment so as to insure the benefit of such system or equipment to the group seeking its use and to minimize any unreasonable interference with the peace and enjoyment of other users of the park and those adjacent to such park.
- (5) The Police Department is authorized to require the discontinuance of any such system or equipment operating outside the prescribed hours or location.

24.08 NOISE REGULATION

- (2) In the following zoning districts established under Chapter 28 of the Madison General Ordinances, the noise emitted from any source and measured at any point within any distance beyond fifty (50) feet of the property or public right-of-way where the noise is produced or beyond fifty (50) feet from the noise source when such exists on public property shall not exceed the amounts indicated in the following table:

SOUND PRESSURE LEVEL

R1, R2, R3, R4, R4A, R4L, Agriculture

Conservancy, Office Residence

7:00 p.m. to 7:00 a.m.—70 dBA

7:00 a.m. to 7:00 p.m.—75 dBA

PARK EVENT TEMPORARY STRUCTURE PERMIT APPLICATION

EVENT ORGANIZER INFORMATION

Name of Group Children's Voice Inc

Contact Person Jill Nyland

Address 4830 Valor Way, Madison, WI, 53718

Work Phone (608) 579-1182

Home Phone 608-577-1867

EVENT INFORMATION

Event Name Madison Garden Marathon, 4 mile Run/Walk

Park Requested Olbrich Park

Event Date 9/27/14

Number of People 600

TEMPORARY STRUCTURE INFORMATION

> What type of temporary structure do you plan to have? How many?

Tent
 Inflatable

Dunk Tank
 Trailer

Staging
 Other (please specify) 15L x 20H Arch Inflatable

> Size and/or Dimension 10x10 medical tent, 20x10 snack tent, 45x30 event post party tent

> Time duration this structure will be in the park 9/26/14 - 9/27/14

> Diggers Hotline Ticket Number 03005082924

(Please note: Diggers Hotline phone number is 1-800-242-8511. The ticket number must be received in the Park Office at least 5 days prior to the event. You may call (608) 266-4711 or fax (608) 267-1162 the ticket number to the Parks Office.)

> Location of the structure in the park. You must attach a park map. Park maps can be downloaded from Parks website www.cityofmadison.com/parks or obtained in the Parks Office.

> Company installing the structure A to Z Rental

> Do you or the tent installer have insurance to cover the placement of this structure for your event? Yes No

Temporary structures, such as tents, staging, trailers, dunk tanks, inflatables, or promotional equipment will only be allowed in a park by obtaining a permit.

This application must be returned to the Park Office no later than 5 days prior to the event.

Today's Date _____

Madison Garden Marathon

4 mile run / walk

September, 27th, 2014



Contact Information

Jill Nyland

4830 Valor Way

Madison, Wi, 53718

Phone: 608-577-1867

Email: jillnyland@ymail.com

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Olbrich Park special event

Name of event

Madison Garden Marathon, 4 mile run walk

1. Type of event

Half and full Marathon, 4 mile run walk. Event features music and food and drinks after event. Face painting and balloon twisting.

2. When

September 27th, 2014

2. Date

Set up- Friday September 27th, 2014 (tents)

Set up- Saturday September 27th, 2014

Event date- Saturday September 27th, 2014

Tear down date- Saturday September 27th, 2014

3. Times

Set up time- Friday September 26th 2014 12pm-4 pm

Set up time- Saturday September 27, 2014 12am-8am

Event day- Saturday September 27th, 2014 8 am- 2pm

Tear down time- Saturday September 27th, 2014 3pm- 8pm

4. Location

Olbrich Park and Lakeland Ave

5. Road Closure

None

6. Parking plan

Parking available at Olbrich park baseball field and Olbrich park beach area. No parking sign at Olbrich Botanical Gardens. Parking sign arrows placed by parking areas.

7. Traffic Plan

Right lane on Atwood Ave closed. Advanced right lane closed warning sign 200 feet before type 3 barrier. There will be a type 3 barrier with a flashing Arrow at Oakridge Ave. Cones will be along Atwood Ave until Winnequah Rd. Runners starting at different times for crowd control.

8. Attendance

Estimated participants 600.

9. PA System

Beginning of the Race 7:45- 8:30. Music played over PA system 9:30 am- 12:30 pm with announcements. No Band

10. Alcohol Sales

No Alcohol will be sold

11. Food and Beverages

Water stations with water and Gatorade every 2 miles free with registration. Water bottles handed out at the end of the race free with registration. Prepackaged cookies, chocolate milk and whole fruit with registration at the end of the race. Coffee, bagels, Chips, candy bars, Slushy's sold at vending tent. Maximum of 2 free beers with registration.

Site Plan

Madison Garden Marathon water and portable toilet stations

Mile 2-Shluter Beach on Winnequah Road

Mile 4- Winnequah Park by Monona pool

Mile 6- Paunack Park of Waunona Way

Mile 8- Olin Park

Mile 10- Law Park

Mile 12- Yahara Park

4 mile walk / run water station and Portable toilet stations

Water station and Portable toilet will be at Capital City Trails and Division Street.

EMS

1. Paratech Ambulance at the end of the Marathon
2. Monona EMS located at Winnequah Park by swimming pool

First aid

All water stations will have a trained CPR Health care volunteer with a First Aid kit.

Other Safety

1. All volunteers will have an Emergency Response number at hand.
2. Marathon Manager will monitor route for problems or medical needs.
3. One Certified CPR medical volunteer will follow in the back of the crowd and observe for problems.
4. AED boxes at mile 4, 8, and ten. Transported by car to site of incident if needed

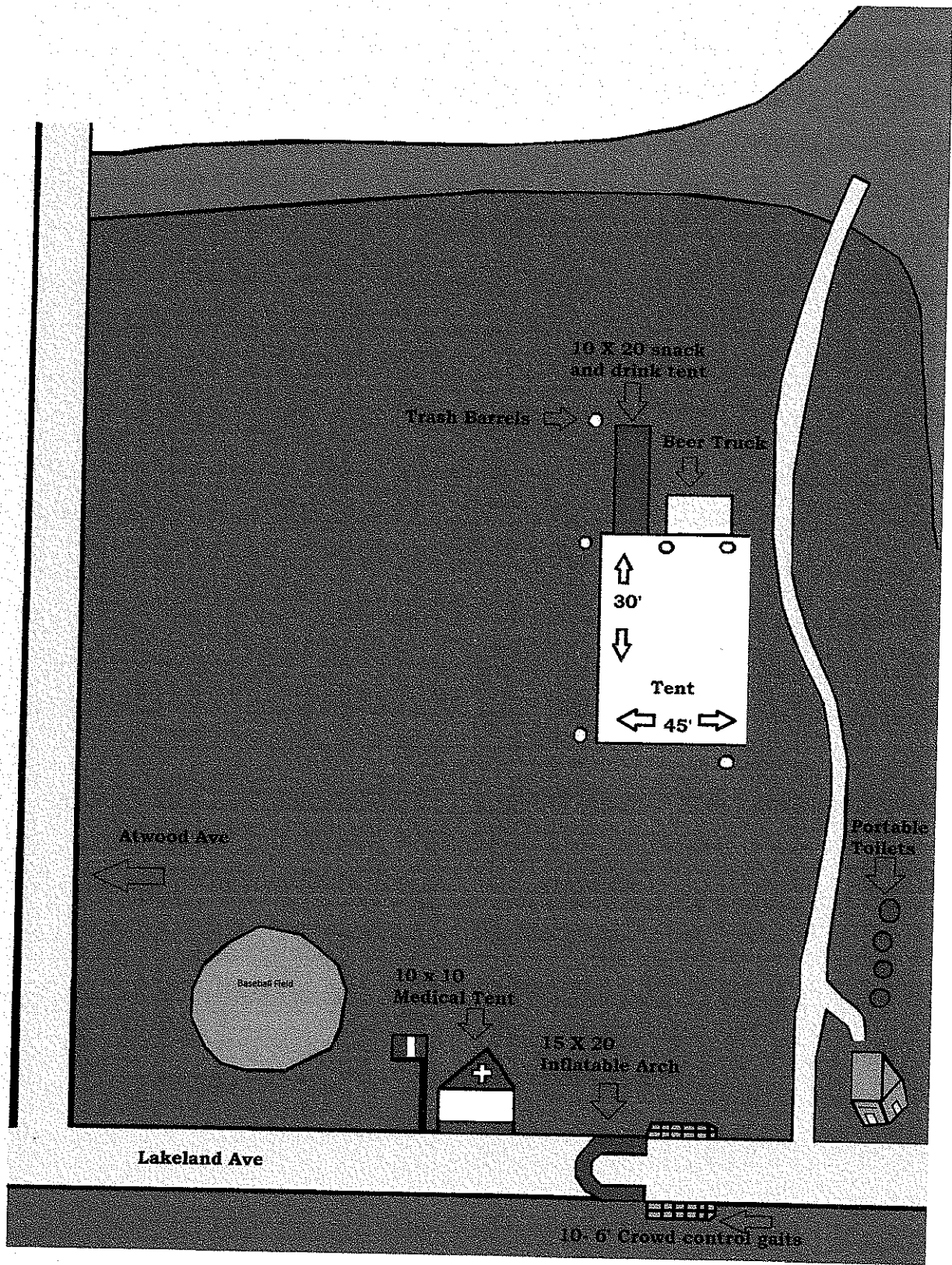
Meeting with presentation, handouts and equipment pickup prior to Marathon

Tents

1. 45' X 30' tent will be at Olbrich Park, Lakeland Ave side.
2. 15- 8 inch tables with 60 chairs in tent.
3. Beer truck at side of tent
4. Men and Women's bathroom and 4 Portable toilets available.
5. 20' X 10' vending tent by beer truck.
6. 10' x 10' Medical tent by finish line.

Other structures

1. H: 15' L: 3' W: 20' inflatable arch at finish line
2. 10-6' crowd barrier gaits before arch.



All Marathon and 4 mile / walk activities

Lakeland Street start- Marathon runners will be chipped timed therefore there will be a 15 x 20 'arch at the beginning and finishing line. There will also be 10 crowd gais prior to the arch 5 on each side. There will be a red tent 10 X 20 at Olbrich Park that will sell coffee, bagels, chips, candy bars and slushy's'. People will be able to pick up their shirts at Olbrich Park prior to the race at the white tent.

Guiding the Marathon and 4 mile run/ walk- There will be arrow signs along the half marathon and the 4 mile run walk whenever there is an intersection there will be an arrow sign. Whenever the direction may be in question at all there will be an arrow sign. There also will be mile markers at each mile.

Coarse Marshalls- There will be coarse Marshalls along the route to watch for distressed runners, help watch for traffic, and guide runners to the right side of the road.

Photography- There will be one photographer at the end of the race taking photos.

Cones and Barriers- There will be 1 type 3 barrier with a flashing arrow at Oakridge Ave. Advanced warning sign 200' prior to barrier starting land closed ahead. Cones will be down Atwood Ave blocking off the right lane of Atwood Ave until Winnequah Rd. Cones will be taken down soon as the time is up for Marathon runners to run through the area. Runners will be required to run each mile in 14 minutes.

Post party event – Beer tent at Olbrich Park with free food. Beer will not be for sale a maximum of 2 free beers will be given away with registration. There will be an award ceremony at 11 am.

EMS- There will be 2 EMS aid stations. There will be one EMS aid station at Winnequah Park. And one EMS aid station at the end of the race.

Water, Gatorade stations and portable toilets- There will be a water aid station and portable toilets approximately every two miles.

Insurance coverage- Insurance will be required for registration. Emergency contact will be required also with registration.

Signed waivers- signed waivers will be required for registration. Emergency contact will be required also with registration.

Advertisement- Facebook, childdrensvoiceinc.org, active.com, Flyers on doors and at health clubs, Bridge banner, Grass signs, radio, and possibly a billboard.

Madison Garden Marathon water and portable toilet stations

Mile 2- Shluter beach on Winnequah Rd

Mile 4- Winnequah Park on Nichols Rd

Mile 6- Paunack Park- off Waunona way

Mile 8.5 – Olin Park after Sheraton Inn

Mile 10 – Law Park

Mile 12- Yahara Park

Mile 4 Run / Walk - Capitol City Trails and Division Street

Aid stations

Paratech located at Olbrich Park

Monona EMS at Nicolas Rd

All water stations will have trained CPR health care workers with a first aid kit

Other Safety measures

All volunteers will have an Emergency response number guide at hand.

Orientation class prior to race with handouts regarding emergency procedures.

Clean up and recycling

1. Trash barrel at each water station
2. Trash barrels at post party tent
3. Designated Volunteer to collect tables, and trash barrels at water station sites.
4. Public encouraged to through water cups into barrels at water station sites.
5. Post Party tent cleaned up by designated volunteers.
6. All volunteers will be asked to clean up water station sites when runners are not running by and after the race.
7. 4 volunteers at every water station site.
8. Designated volunteers to collect all barrels at end of race and dispose of paper cups at home recycling trash barrel. 22 volunteers helping to clean up water station sites. 3 designated volunteers to clean up post party tent area.
9. Marathon Manager to oversee all water station sites and post party tent clean up.

Water stations	Volunteer 1	Volunteer 2	Volunteer 3	Volunteer 4
Mile 2- Shluter Beach 7AM- 11 :30am	Richardson Lawn care- Michelle	Richardson's Lawn care- Rene Brown	Richardson's Lawn care- Rachel Brown	Richardson's Lawn care- Andrew French
Mile 4 - Winnequah Park 7:15park- am- 12 pm am	UW Health Team- Johna Helke-AED	UW Health Team- Johna's husband	UW Health Team-Amala	UW Health Team-Areille Green Dre Green
Mile 6- Paunack Park- 7:30am- 12:30 pm	Children's voice <u>Toni Missbach</u>	Children's voice Megan	Children's voice Kali	Children's voice
Mile 8.Olin Park 7:40a m -1 pm	UW Health Mylah Draves- 2nd (coolers)	UW Health Bryan Draves	UW Health Melissa Fordahl	UW Health Matt Hinkle-1st responder-AED
Mile 10.Capital city Trail/ Monona Terrace7:50 am-1 :30 pm	SimpleCommunications Jessica Lauck	Simple Communications- Tracy Olson	Simple Communications- Julie	Simple Communications - Jenny
Mile 12- Yahara park 8 am- 2pm	UW Health team- Daniel Nwagwud- AED-1st responder	UW Health team- Lisa Rabe	UW Health team Felicity	UW Health team- Melissa Rasmusson-2nd responder
4 mile run / WalkCapital City trail and Divisio n street 730 am- 9 am	Children's Voice- Andrew Nyland- (Coolers)	Children's Voice- Rae Beret	Children's Voice- Paljor Dhondup- 1st responder	Children's Voice

Winnequah Rd and Dean ave 8 am to 11:30 am	Volunteer	Atwood Ave & Dennett - 700-9:00	6-7 Police parking 7:30- 8am
Nichols and Maywood turn around point 8:15 am-12 pm	Volunteer	Capital City Trails & Dennett 7:30 -7:45	Event manager
Nichols Rd and Winnequah rd 8:15-12 pm	Volunteer	Walter and Capital City Trails-7:30 - 8:00	Police
Winnequah rd and Tanywatha trail 8:15 -12 pm	Volunteer	Capital City Trails & Fair Oaks Ave- 7:40 -8:30	Police
Winnequah rd and Bridge Rd 8:30-12:30	Volunteer	Capital City trails & Atwood Ave 7:40-8:40	Police
John Nolen and Rimrock rd 8:30-1:30 pm	Volunteer	Atwood Ave & Dunning street-7:40 - 8:40	Police
Olin Turville court and Lakside 8:45-1:45	Volunteer	Capital City Trails & Division St- 7:50 -8:40	Water table volunteers
			Marlee Rolfsmeyer
Pass out shirts Friday Sept 26th - 1 pm-6 pm	Endurance House- Volunteers 2	**Pass Medals, water-8:05- 1150	Volunteers-2
Medical EMS	Monona EMS / Paratech	UW Medical tent	Sylvester, Jill Nyland, Paljor, Monica
Bike Riders	Matt -1st responder	Beer Tent	Julie

Budget

Shirts 600 people	3000.00
Timing	2000.00
Prizes	3000.00
volunteers	1000.00
Water / Gatorade	100.00
Table rental 15 x 9.50	142.50
Tent chairs 60 x 1.25	75.00
Portable toilets 9 x 85.00	765.00
A to z tent rental	635.00
Beer tent rental	300.00
Insurance	700.00
Noise permit	100.00
Structure fee	225.00
Vending permit	300.00
No Parking signs	44.00
Clean up deposit	3000.00
medals	1000.00
clown	250.00
Total	16636.50

Emergency Quick Response Guide

Madison Fire / EMS	266-4420
Paratech Ambulance	(866) 525-8888
Madison Police	266-4316
Monona Fire / EMS	222-2528
Monona Police	222-0463
Race Director	577-1867
Weather Emergency updates	890-6000
Weather Emergency updates	1-888-596-6655

Missing child or person

When a child or person is believed to be missing or lost. The Madison police, Monona police and the race director will be notified immediately. The Volunteer will notify the police and race director and provide the missing person or child's.

Name:

Age:

Gender:

Physical description:

Clothing description:

Last known location:

Direction of travel:

The caller or person with the most information must stay at the nearest location for responders. Missing child/ Person form should also be filled out. Family

members then can be directed to the missing person location which will be the red tent.

Announcement

Each volunteer or group will be notified immediately. All volunteers will search the area for the child. Report any child who matches the description.

Notification of procedure

All volunteers will be giving a presentation to the missing person procedure by meeting or written material.

Emergency Response guide numbers will be handed out at meeting and placed in supply water table boxes for quick access.

All volunteers will be asked to carry emergency response numbers with them during the race.

Lost child designation Area

Announcement will be given at beginning of race. "In case of a lost child the designated lost child area will be at the red tent at Olbrich Park." Volunteers will have a pre-race orientation or will be given written materials regarding the lost child designated area. The volunteers will also be asked to stop and help a child or adult that may look lost. Runners will be made aware of lost child designated area at the beginning of the race. An announcement will be given regarding the lost child every few minutes until the child / adult is reunited with his/ her family.

Begging Race Enouncement

Thank You for coming to the second annual Madison Garden Marathon, 4 mile run / Walk. Your participation is going to raise awareness of child abuse and help fund children's Voice to purchase Children's book to donate to daycares and Elementary Schools.

The Marathon starts at 8 am. The half Marathon starts at 8:15. The 4 mile run starts at 8:30 am. We start the race at the sound of the horn. There are blue arrows that you can follow. (Show the Arrows.)

The lost child designated area will be at the red tent. For any reason at all if you need medical help or any other help at all. There are several volunteers along the route that can help you. Please do not hesitate to ask for help for anything at all. The Medical director will be at the red tent by the finish line if you have any questions or concerns.

The roads are not closed so be careful out there. The Award ceremony is at 11am at the white tent. Please stop by to get your prizes. Prizes are not guaranteed if you do not attend the award ceremony.

And now we will take a few minutes to listen to the national anthem before the race.

MADISON GARDEN MARATHON

Madison, Wisconsin

Measured by David Moore, Appleton, WI

dave.moon@yahoo.com

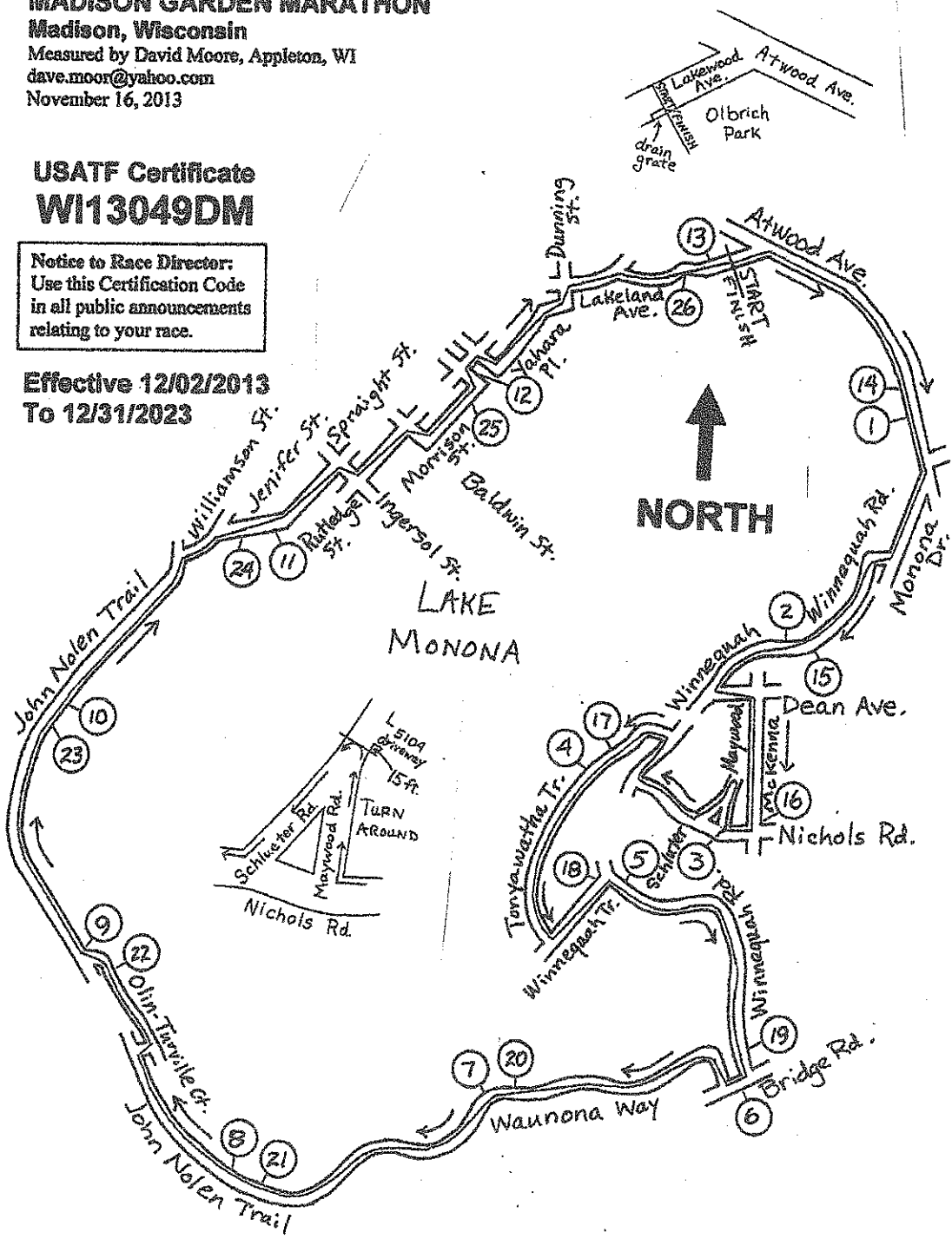
November 16, 2013

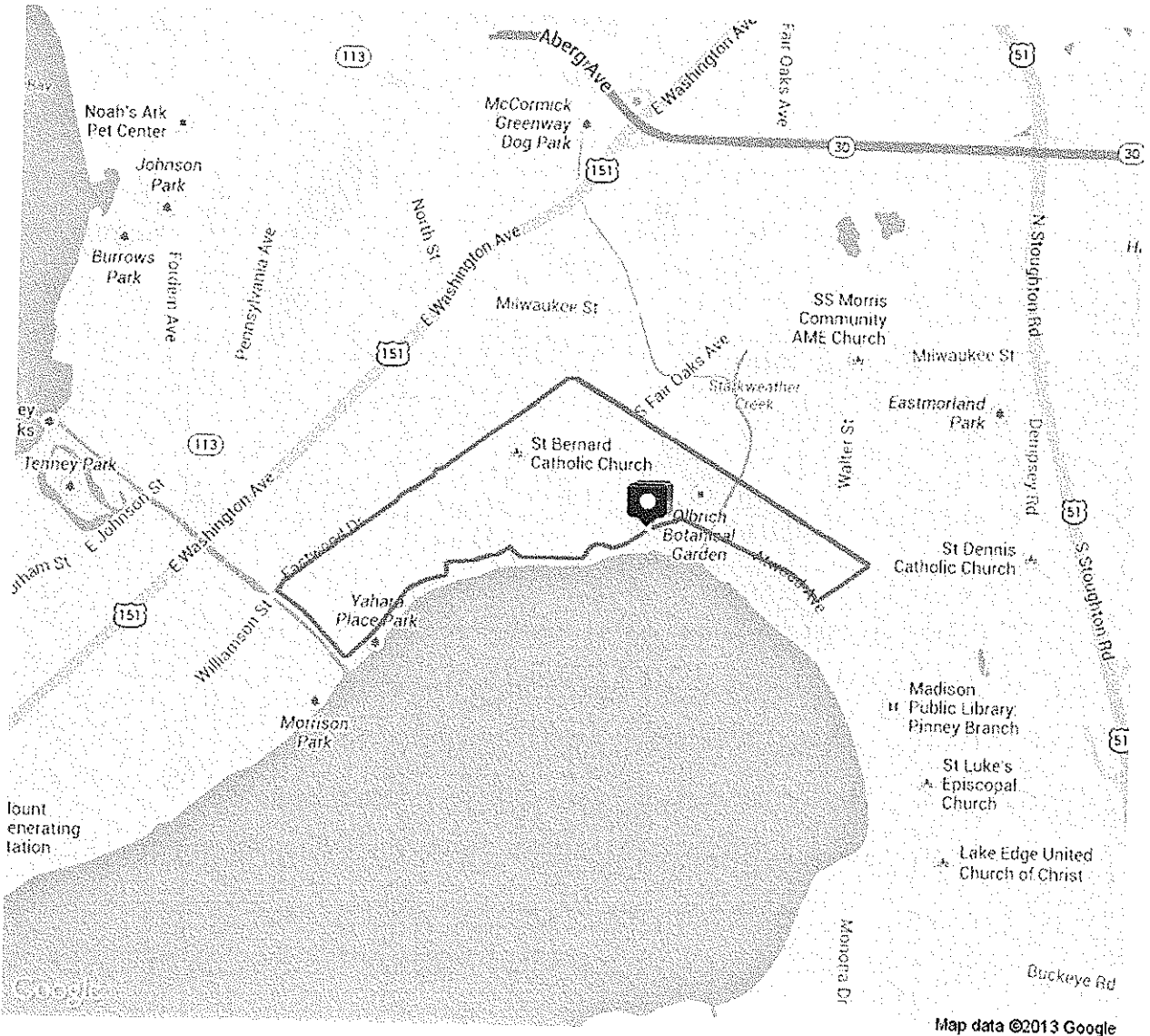
**USATF Certificate
WI13049DM**

**Notice to Race Director:
Use this Certification Code
in all public announcements
relating to your race.**

**Effective 12/02/2013
To 12/31/2023**

- START:** Lakeland Ave. SW of Atwood Ave.
Olbrich Park
NE edge of drain grate
- 1 Mile:** Monona Dr. south of Davidson St.
4007 Monona Dr.
2 ft. N of south end of south garage
- 2: Winnequah Rd. E of Waterman Way
4516 Winnequah Rd.
29 ft. W of Schluter Park walkway
 - 3: Maywood Rd. N of Nichols Rd.
house on northeast corner
22' 7" south of driveway
- Turn around:**
- 4: Tonyawatha Trail / Vogts Lane
5 ft. N of stop sign on SE corner
 - 5: Winnequah Rd. / Henly Lane
5 ft. east of Healy Lane
 - 6: Bridge Rd. W of Winnequah Rd.
55 ft. W of east end of bridge railing
 - 7: Waunona Way NE of Raywood Rd.
2517 Waunona Way
28' 6" east of driveway
 - 8: John Nolen Trail N of Hwy. 12/18
4' 6" S of WELCOME TO MADISON
 - 9: John Nolen Trail / Lakeside St.
North edge of north crosswalk sign
 - 10: John Nolen Trail N of Broom St.
62 ft. N of 1st bench north of Broom St.
 - 11: Spaight St. S of Paterson St.
836 Spaight St.
22' 6" north of hydrant
 - 12: Thornton Ave. NW of Morrison St.
706 Thornton Ave.
8 ft. east of driveway
 - 13: Lakeland Ave. SW of Welch Ave.
3128 Lakeland Ave.
10' 4" south of power pole





Madison Garden Marathon

4 mile run / walk

September, 27th, 2014

Emergency Safety Plan



Contact Information

Jill Nyland

4830 Valor Way

Madison, Wi, 53718

Phone: 608-577-1867

Email: jillnyland@ymail.com

Command Group

		Channel	Phone
Jill Nyland	Event director	1	608-577-1867
Sylvester T Youlo	Medical Director	2	240-305-589-5189
Chris walters	Paratech Ems	2	236-3634
Frank Fenton	Monona EMS	2	608-222-2528
Emily Hardiman	Madison Police	2	608-266-4022
Security JBM	Jim Mankowski	2	608-222-5156

Radio users	Channel	Phone	Position
Marathon Manager	1		Manager
Matt Remus	1	920-248-9343	Back of the Marathon
Michelle Brown	1	608-669-4983	2 Mile table captain
Johna Helke	1	608-338-3425	4 Mile Table captain
Toni Missbach	1	1-815-321-9536	6 Mile Table Captain
Mylah Draves	1	608-520-7342	8 mile Table captain
Tracy Olson	1	608-669-7429	10 Mile table Captain
Lisa Rabe	1	608-247-1199	12 Mile table captain
Paljor dhondup	1	608-335-3164	4 mile table captain
Monica Hall	1	1-608-469-3418	Medical Tent
Rick Huxtable	1	1-715-571-670	Timming
Richardson's Lawn		608-669-4983	Cone Set up and take down
Matt Hinkle	1	608-354-7605	AED Holder
Daniel Nwagwud	1	333-8357	AED Holder
Johna Helke	1	608-338-3425	AED Holder

Weather Safety Plan

Prior To the event

- ✗ The race director will monitor weather for 2 days prior to the event.
 - ✗ If severe weather conditions appear to be in doubt during any time of the event the event will be cancelled.
 - ✗ In the event of Temperatures reaching higher than expected levels. Race director will plan for placing extra water tables and volunteers on the route.
 - ✗ All runners / walkers will be notified of flag color warning in t-shirt hand out bags prior to the race.
 - ✗ If race is cancelled before race. Emails will be sent out and posted on the web sites.
-
- ✗ **Reasons event will be cancelled**
 - ✗ Severe thunderstorms
 - ✗ Tornado
 - ✗ Excessive heat

Before the event

- ✗ If an emergency occurs before the event. The event commanders will meet in the blue medical tent by the start line. The Event commanders will then make a decision regarding the emergency that arose.

During the race

- ✗ The Marathon Manager will continue to monitor the race every hour by NAON radio and internet to monitor weather.
- ✗ In the event of change of weather conditions that are not dangerous to the participants. Marathon Manager will notify all table captains by two way radio or cell phone to change flag color.
- ✗ If any emergency should arise suddenly during the event such as severe weather (lightning, heat, humidity, wind or tornadoes). The Command group will meet at Olbrich Botanical Gardens in the commons room to assess the status of the event.

Public Emergency

- ✘ If any public emergency becomes a concern the command group will meet at the Red medical tent to determine the status of the event.

Weather Emergency Evacuation Plan

- ✘ If the command group determines a weather evacuation is needed due to severe weather that occurs suddenly or unpredicted during the event.
- ✘ The Event director
- ✘ Race Director will notify all volunteers by 2 way radio or cell phone to seek shelter.
- ✘ Rick Huxtable will notify people at the start and finish by PA to seek shelter.
- ✘ Participants and spectators will be notified to seek shelter in the following areas.

Volunteers will be assigned a shelter area to report to with participants

Olbrich Botanical Gardens	Rick Huxtable
Monona Library	Johna Helke
Monona Terrace	Tracy Olson
Sheraton Inn	Matt Hinkle

After all clear participants and specters will be able to exit the area

Weather flags

Weather flags will be flying at each water station when you get there. These flags are to warn the Runners of weather conditions and the dangers of weather related thermal stress.

Flag colors

White flag-When the weather is below 50 degrees. People are in danger of hypothermia

Green Flag- Low risk of heat injury. Temperature 50 degrees to 65 degrees. Participants are encouraged to drink water.

Yellow flag- Moderate risk of heat injury. Temperature of 65 degrees to 73 degrees. Participants should drink plenty of water. Participants should also slow down if they are sensitiv to heat.

Red flag- High risk. Temperature of 72 degrees to 82 degrees. Participants should drink plnty water and slow down. Participants that are heat sensitive should not run. Race will be cancelled if temprature reaches 82 before finsh of race.

Black flag- Extreem risk. Temperature is above 82 degrees. Race will be cancelled if temprature reaches 82 degrees before race is finished. Other events that could cause a black flag would be tornadoes or lightning. Participants should seek shelter. A human disaster could also cause the black flag to go up.

Medical Emergencies

- ✗ Only basic life support will be provided. All other serious injuries need to be transported to the hospital.
- ✗ Assess all the runners at the finish line and on the course
- ✗ Any request for medical assistance should be directed to medical staff.
- ✗ Do not attempt to help an injured person other than calling for medical staff
- ✗ First aid kits at water stations should be used for volunteers only
- ✗ Any medical concerns should be directed to medical direct, Race director or medical volunteers at aid stations.
- ✗ CPR Certified staff may use CPR if needed.
- ✗ If a participant is in need of medical assistance use the two way radio or cell phone to call for medical assistance.
- ✗ Give your name, location and medical condition of the participant or spectator.
- ✗ Stay with the person needing the medical attention until medical staff arrives.
- ✗ Gather information for the Event Incident report.
- ✗ If you do not have a two way radio available call event Director for further instructions. (Jill Nyland 608-577-1867)
- ✗ Each aid station will have a volunteer at it that can help assist with getting the injured person the help they need.
- ✗ Each water station will have a two way radio to call for help.
- ✗ Do not give names over the radio. Also remember to keep participant and spectators information confidential.
- ✗ If medical staff is not close by call 911 for life threatening incidents.
- ✗ Once an injured person gets there medical needs meet. Use the two way radio to let medical staff know that medical assistance is no longer needed at destination of the participant / spectator. For example "medical assistance is no longer needed at Rutledge and lakeside street. "
- ✗ Fill out incident form at the red tent as soon as possible and leave the form at the red Tent.

- ✘ Runners will be informed if for any reason they cannot make it back to let a volunteer know.
- ✘ Volunteers on site will come and get the runner and bring them back to the finish of the race.
- ✘ AED's will be located at table 4, 8 and 12.
- ✘ AED's will be assigned to a CPR volunteer and transported by car to the non-responsive person.
- ✘ If needed call for the closest AED
- ✘ Give detailed description were the non-responsive person is.

When to call security or police

- ✘ Security or police May be needed in an event were a person is down and the ambulance needs to get through a particular area were people may be crowding around.
- ✘ Police or security may be needed in the event of a fight, a suspicious person or package, etc.
- ✘ Use two way radio to contact command group and request for security.
- ✘ Give your name, location a brief description of reason why security is needed.
- ✘ For example "Security or Police needed at Rutledge Street and lake street for a fight occurring".
- ✘ If no two way radio is available contact Race Director (Jill Nyland) at 608-577-1867
- ✘ Once the Security shows up and the issue is resolved place call out by 2 way radio or cell phone (Jill Nyland 608-577-1867) that security or police is not needed any more.
- ✘ Gather information for Incident event form
- ✘ Fill out incident form at the red tent as soon as possible and leave the form at the red Tent.

Emergency transportation

- ✘ An ambulance will be available at the event that we can call if we need someone transported to the hospital
- ✘ If medical transportation is needed paratech may be called. Paratech's number will be located on the emergence guide card handed out at the beginning of the race.
- ✘ The medical director Sylvester T Youlo may also be contacted if Paratech cannot be reached.
- ✘ If for some reason the ambulance or the Medical director cannot be reached call 911.

Nonemergency transportation

- ✘ There will be a sag vehicle available at the event
- ✘ Contact the race director for any non-emergency needs if a participant for some reason cannot make it to the end for personal or injuries reasons
- ✘ Participant will be transported back to the beginning of the race.

Communication

- ✘ A medical tent will be located at the end of the race. The Medical director will be available at this location by cell phone or two way radio at all times.
- ✘ Each water station will have an assigned two way radio operator and an emergency cell phone number guide.
- ✘ The primary method of communication should be the Radio.

Medical stations

- × Monona EMS will be located at the Winnequah Park for any medical needs.
- × A medical tent will be located at the end of the race for any medical needs
- × The medical Director will be available during the whole race at the medical tent. He may be contacted by radio or cell phone.
- × Paratech will be located at the end of the race also for any medical needs.
- × Rn's will be at the end of the race assessing runner for distress and guide them to the medical tent if needed.
- × The medical tent will be at the end of the race
- × A Paratech ambulance will be available on call if needed to transport runners to the hospital if needed.
- × The ambulance at the end of the route will remain there for any medical needs.
- × All sports injuries should be directed to the medical director.
- × There will be RN's and EMT's at the tent to follow medical director's instructions.
- × Injuries most likely will be musculoskeletal problems and possibly minor heat illness that require only cooling and oral hydration.
- × IV hydration will be available in emergency situations only at the medical tent
- × First aid supplies will be available at the medical tent along with BP cuffs, Stethoscopes, IV fluid, ice bags, ice water, Etc

Lost Child / adult procedure

- ✗ An announcement will be given at the beginning of the race that the lost child designated area is at the red tent.
- ✗ The designated lost child area will be at the red tent where notifications can be announced.
- ✗ If a child or adult is assumed missing first check to see if they finished the race with the timing by cell phone or 2 way radio. Rick Huxtable (715-571-6720)
- ✗ If a lost child is found take the child to the designated lost child area.
- ✗ Volunteer staff will be able to watch the lost child. Do not leave the child alone.
- ✗ If you cannot get the child to the area because you are volunteering call security or the police to take the child there.
- ✗ A lost child form must be filled out completely before the end of the race.
- ✗ An announcement by PA will go out every 15 minutes until the child is reunited with his or her family.
- ✗ If the child is found encourage family to come to the red tent to get the child.
- ✗ If an adult / child is lost. An announcement must go out every 15 minutes to everyone. Everyone who is volunteering must look for the lost child or adult. A detailed description should be given regarding the missing person.

Missing Person Protocol Missing/Found Person Report Form

Missing/Found Person Report Form

Name _____ Adult Child

Person Reporting _____

Race	Sex	Age	Ht	Wt.	Eyes	Hair

Clothing description:

Time last seen: _____

Location last seen: _____

Other information, Medical, etc. _____

Child

Escort child to Lost & Found tent

Do not release child to any adult who may find you along the way that wants to help.

Be polite but firm and explain it is for the child's safety and security

Back each other up

If uncooperative, call the

Event Leader to get

Security.

Adult Looking for Missing Child:

Escort or direct adult to Lost & Found tent.

Explain that volunteers will be dispatched to search for missing child.

Have adult stay close to tent

Accident / Incident Report Form

Name of person completing form: _____

Position: _____

Contact Address: _____

Tel Number: _____

E.Mail: _____

1. Description of Incident

Actual Personal Accident / Injury

Potential Personal Accident / Injury

Lifting Handling

Fire Related Incident

Slip / Trip / Fall

Vehicle Related

*If other please specify: _____

2. Was any individual affected or injured by the accident

Yes No (If no go to section 8)

Volunteer Runner Spectator

Name: _____

Date and time of Incident _____

Location _____

3. Type of injury

Fracture Sprain Laceration Bruising
Burn Loss of consciousness Puncture / Needlestick
Dislocation Dehydration Dislocation

4. Site of injury

Head Shoulder Abdomen Finger
Ankle Face Chest Arm Hip
Foot eye Upper back Wrist
Thigh Toe Neck Lower Back Hand
Lower leg

If other please state- _____

5. Did the person need treatment?

First Aid Seen by Doctor Accident & Emergency
Other*

Name of Hospital: _____

* If other please specify _____

6. Persons in Attendance (First Aider)

Name _____

Name _____

7. Witnesses

(Statement(s) attached)

Name _____ Name _____

Address _____ Address _____

Telephone number: _____ Telephone number _____

8. Please describe the Accident/Incident/Hazard
(Use factual details only - provide diagram if appropriate)



8. Action taken to remove / reduce risk

9. The information provided on this form is, to the best of my belief, an accurate and correct report of the accident / incident

Name _____ Status _____

Signature _____

Event Director notified



Return completed certificate to:
 City of Madison Risk Management
 Attn: Risk Manager
 210 Martin Luther King, Jr. Blvd., Rm. 406
 Madison, WI 53703-3345
 608-267-8705 (FAX)
 608-266-3965 (PHONE)

This Form Must be Completed in its Entirety
Certificate of Insurance



-To-
 City of Madison
 Madison, Wisconsin

This certifies to the Municipality the following described Policies have been issued to the insured named below and are in force at this time.

Name of Insured Children's Voice Inc

Address 430 Valor Way Madison, WI 53718

This certificate is furnished to the Municipality to induce the Municipality to take official action and may be relied upon by the Municipality.

Description of operations insured. Special Event

Policies and Insurers	Limits	Policy Number	Policy Period
Commercial General Liability	Each Occurrence \$ 1,000,000	CP02322198	9/27/2014-9/28/2014
	Aggregate \$ 2,000,000		
(Insurer)			
Business Auto Liability	Coverage Symbol		
	Combined Single Limit \$		
(Insurer)			
Umbrella Liability	Occurrence/Aggregate \$		
	Retention \$		
(Insurer)			
Worker's Compensation	Employer's Liability \$		
	Statutory (states)		
(Insurer)			
Professional/Other Liability	Per Claim/Other \$		
	Aggregate \$		
(Insurer)			

The following coverages or conditions are in effect: (MUST BE ANSWERED "YES" FOR APPROVAL).....YES NO

- The Municipality, its officials, and employees are named on the Commercial General Liability policy(ies) described above as additional insured as respects:
- (a) activities performed for the Municipality by or on behalf of the insured, YES NO
 - (b) products and completed operations of the Named Insured, and YES NO
 - (c) premises owned, leased or used by the Named Insured YES NO
- Products and completed operations. YES NO
- The undersigned will mail to the Municipality a written notice within 30 days of cancellation or reduction of coverage or limits YES NO
- Contractual Liability Coverage applying to this Contract YES NO

This certificate is not a policy and does not amend, extend, or alter the coverage afforded by the policies listed herein. Notwithstanding any requirements, terms or conditions of any contractor other document with respect to which this certificate of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.

Neckerman Insurance Services
 Agency or Brokerage

6200 Mineral Point Road, Madison, WI 53705
 Address/City/State/Zip Code

Capitol Insurance Company
 Insurance Company

Karen Sells
 Authorized Signature*

Janelle Higgins/Katie Schneider
 Name of Contact Person

608-238-7798 608-238-7798
 Telephone Number FAX Number

12-26-13
 Date

*NOTE: Authorized signature may be the agent's if the agent has placed insurance through an agency agreement with the insurer. If the insurance is brokered, the authorized signature must be that of official insurance.

Lamberty, Kelli

From: Jill Nyland [jillnyland@ymail.com]
Sent: Tuesday, February 25, 2014 1:52 PM
To: Lamberty, Kelli
Subject: Re: Madison Garden Marathon
Attachments: beer distributor 001.tif

Hello Kelli,

I decided not to sell any beer last year. We just ended up giving the one free beer. I did not want to encourage a lot of drinking around children so at the last minute I decided not to go forward with selling beer. I payed 400 dollars for the beer that was drank and returned the empty barrels. I received a return of \$322 for the 2 barrels of beer that was not drank. I will send you more documentation when Wisconsin Distributors emails the final bill receipt to me per my request.

Thank you,

Jill Nyland

On Tuesday, February 25, 2014 8:58 AM, "Lamberty, Kelli" <KLamberty@cityofmadison.com> wrote:
Jill – sorry, I've been meaning to contact you about the applications you submitted for Madison Garden Marathon and explain the review process. For the Parks event application, we need an accounting of the beer sales you had last year (see last year's conditions, attached) and the Parks Commission will review your application for this year's event. If you can get the report to me by the end of this week we can have this on the March Park Commission agenda. The meeting is March 12. Parks Staff is supportive of the Garden half-Marathon application for 2014 and will make a recommendation to approve the event.

The street use permit application will be reviewed after the Park Commission has ruled on the event. We have a meeting March 19th and the application can be on that agenda if it's approved.

I think that's it for now. Sorry again for the delay – lots of events going through the permitting process this time of year. Let me know if you have additional questions. Kelli

Kelli Lamberty
Community Events Coordinator
Parks Division
City of Madison
210 MLK Jr. Blvd. Rm. 104
Madison, WI 53703
608-266-6033

Like us on [Facebook](#). Follow us on Twitter @PlayMadison.

Wisconsin Distributors

900 Progress Way
 Sun Prairie, WI 53590
 (608) 834-2337 Fax: (608) 834-2300

Salesman 32301 - Special Event

CHILDRENS VOICE INC
 4830 VALER WAY
 MADISON, WI 53718

Statement Summary

Account: 710090
 Statement Date: 10/04/13

Last Payment:
 Last Payment Date:

Age
 [A] Current: 390.00
 [B] 16 to 30: 0.00
 [C] 31 to 45: 0.00
 [D] over 45: 0.00
 Balance Due: \$390.00

Outlet	Date	Age	Invoice	Reference	Amount	Total
710090	CHILDRENS VOICE INC			4830 VALER WAY		
	09/27/13	A	349337		716.00	716.00
	10/03/13	A	349731		-326.00	390.00

*paid 10/8/13
 check 2761
 \$ 390.00*

----- Cut Here -----

Wisconsin Distributors

900 Progress Way
 Sun Prairie, WI 53590
 (608) 834-2337 Fax: (608) 834-2300

Payment Coupon

Please include this coupon with your payment and write your account number on the check.

Account Number	Statement Date	Amount Due	Amount Enclosed
710090	10/04/13	\$390.00	

INVOICE # 344837

ORDER # 710090

DATE 09/23/13

Page 1 of 1
Route # 0000 Stop # 10
Salesman # 92301 Special Event

CHILDRENS VOICE INC
4830 VALER WAY
MADISON, WI 53718
608-577-1867
Tax # PERCPB-2013-00010
Lic LICUPR 2012-0999
JILL MYLAND
NET 15-GENERAL

Wisconsin
Distributors LLC
900 Progress Way
Sun Prairie, WI 53590
608-834-2337

Due Now Total
0.00 0.00

UPC	Case	Prod	Case	Non Case	Description	Price	Disc	Price	Dep	Ext Total
018200119408		11940		1	BUDWEISER 1/2 BBL	90.00	2.00	88.00	30.00	118.00
018200539404		53940		3	BUD LIGHT 1/2 BBL	90.00	2.00	88.00	30.00	354.00
018200555206		55520		1	NBR FAT TIRE 1/2 BBL	124.00		124.00	30.00	154.00
		703		20	PLASTIC 16OZ BUD FRG	4.50		4.50		90.00

Charg
Thank
Jill

NonCases 25 *D. J. P.*

Total 716.00

Sign up for our auto-pay option! Stop writing checks, online invoice lookup and more. Call now for details.

EMPTIES	DESCRIPTION	QUANTITY	PRICE	TOTAL
980	EMPTIES 1/2 BBL	@	30.00 =	
981	EMPTIES 1/4 BBL	@	30.00 =	
984	EMPTIES 1/6 BBL	@	30.00 =	
973	EMPTIES INBEV 1/2 BBL	@	30.00 =	
954	EMPTIES NBR 1/2 BBL	@	30.00 =	
TAX				0.00
SUBTOTAL				716.00
TOTAL CREDITS				
TOTAL				

SELLER'S SIGNATURE

CUSTOMER'S SIGNATURE

Invoice # 349731

710090

10/03/13

Page 1 of 1
Route # 8888
Salesman # 32301 Special Event

CHILDRENS VOICE INC
4830 VALER WAY
MADISON, WI 53718
608-577-1867
Tax # PERCPB-2013-00010
Lic LICUPR 2012-0098
JILL NYLAND
NET 15-GENERAL

Wisconsin
Distributors
Wisconsin Distributors LLC
900 Progress Way
Sun Prairie, WI 53590
608-834-2337

Due Now Total
0.00 716.00

UPC	Case	Prod#	Case	Non Case	Description	Price	Disc	Price	Dep	Ext Total
018200119408		11940		-1	BUDWEISER 1/2 BBL	90.00	2.00	88.00	30.00	-118.00
018200539404		53940		-1	BUD LIGHT 1/2 BBL	90.00	2.00	88.00	30.00	-118.00
		954		-1	EMPTIES NBB 1/2 BBL				30.00	-30.00
		980		-2	EMPTIES 1/2 BBL				30.00	-60.00
Total										

Sign up for our auto-pay option! Stop writing checks, online invoice lookup and more. Call now for details.

EMPTIES			TAX
980	EMPTIES 1/2 BBL	@ 30.00 =	
981	EMPTIES 1/4 BBL	@ 30.00 =	
984	EMPTIES 1/6 BBL	@ 30.00 =	
973	EMPTIES INBEV 1/2 BBL	@ 30.00 =	
954	EMPTIES NBB 1/2 BBL	@ 30.00 =	
			SUBTOTAL
			TOTAL CREDITS
			TOTAL

DRIVER'S SIGNATURE

CUSTOMER'S SIGNATURE