

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

WELCOME TO THIS MEETING OF THE MADISON BOARD OF PARK COMMISSIONERS

Anyone may speak or otherwise indicate support or opposition to items on tonight's agenda.
You must register first. If you wish to register for more than one agenda item,
complete a separate form for each item. Please turn forms in to the Secretary.

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Agenda Item Number:

14, 19 - TWO Items
~~39886~~
39886

Topic:

Do you have Handouts? Yes

No

Big Top Events / Ampl. Prod
Sound & Fees

Please check the appropriate boxes:



- Support 14
 Oppose 19
 Neutral/No Opinion

and

- Wish to speak
 Do not wish to speak
 Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Charlie Goldstone Date: 11/18

Address: 1102 Waban Hill

City: Madison State: WI Zip Code: 53711

Representing: Frank Productions

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

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2 Agenda Items 14 + 19

Agenda Item Number:

14, 19

Topic: _____

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support - 14

Oppose - 19

Neutral/No Opinion

and

Wish to speak

Do not wish to speak

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

Scott Leburg

Date:

11/18/15

Address:

305 S MILLS ST

City:

MADISON

State:

WI

Zip Code:

53405

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

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Agenda Item Number:

Topic: Proposed Amplification sound

Do you have Handouts? Yes No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Bill Bright Date: 11-18-75

Address: 306 Atwood St

City: Madison State: CA Zip Code: 93701

Representing: myself

If representing other than yourself, complete the back of this form.

Comments (please print clearly): The erosion of community event which limit sound could be the death of such events which help build community, help fund non-profits, & enhance the reputation of Madison

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Agenda Item Number: 19 Topic: Proposed 2016 Amplified Sound
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Lee Gottschalk Date: 11-18-15
Address: 5609 Sedgemoor Rd
City: Middleton State: WI Zip Code: 53562
Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): I strongly oppose the additional fees to the wonderful music festivals on Madison's East Side.

These events are incredibly important for the local non-profits, for building community, supporting local programs and bring culture and joy to our city's people.

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 40772 Topic: Amplified Sound Fees
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|---|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input checked="" type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Todd Jensen Date: 11-18-15
Address: 1808 Rutledge St.
City: Madison State: WI Zip Code: 53704
Representing: Wil-Mar Neighborhood Center
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 19 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- Support
 Oppose
 Neutral/No Opinion

and

- Wish to speak
 Do not wish to speak
 Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Tim Woodworth Date: 11/18/15
Address: 5746 Bittersweet Place
City: Madison State: WI Zip Code: 53705
Representing: self

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____
85 dB is not a realistic limit

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 19 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Prabhjot Kaer Date: 11-8-15

Address: 660 Harvest Lane

City: Verona State: WI Zip Code: 53593

Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): I want the festivals to continue
and the community to continue it, because it brings
community integration.

Thank you for taking part in tonight's meeting.

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Agenda Item Number: Topic: Parks decisions
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Andy Moore Date: 11/18/15
 Address: 2041 Rutledge St.
 City: Madison State: WI Zip Code: 53704
 Representing: myself
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 40772 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: GARY KALLAS Date: _____
Address: 13 LEON ST
City: MADISON State: WI Zip Code: 53714
Representing: WIL-MAR NEIGHBORHOOD CENTER
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

November 17, 2015

Board of Park Commissioners
City of Madison
Madison, WI 53703
www.cityofmadison.com

Dear Commissioners,

It has come to our attention that you are considering drastic changes to park policy which will critically impact the financial success of events in the Marquette Neighborhood, including the Waterfront Festival, La Fete De Marquette, and the Orton Park Festival. These events have historically greatly benefitted the Marquette neighborhood and the City of Madison by supporting numerous programs and services for vulnerable community members at the Wil-Mar Neighborhood Center, scholarships for youth, affordable housing initiatives through Common Wealth Development, the fostering of small businesses and establishing arts and green space initiatives. These events incorporate hundreds of volunteers who give thousands of hours of their time and welcome the opportunity to directly impact their community. Hundreds of families, local businesses and neighborhood non-profit organizations benefit from the funds generated through these events. We implore you to prioritize the recommendation of the undersigned and work with neighborhood residents to keep our neighborhood parks in use and accessible. Our concerns are briefly outlined here, and described in more detail below.

1. A limit of sound permits for park events to no more than 6 hours, and additional fee of \$45/hour for each hour outside the 6 hour time frame, will greatly increase the cost of sound permits for our neighborhood festivals.
2. The definition of the event perimeter in the permit class #3 is too vague and in some instances more restrictive than the sound limits established in the other permit classes (#1 and #2). Due to the nature of the park layout and established event models, we request that we are allowed the chance to work with the Parks Department to define where the event perimeter will be marked in order to set a consistent location that will be used to measure the event's sound volume.

As you may know, these neighborhood festivals are incredibly important to the success and vibrancy of the Marquette neighborhood, the Wil-Mar Neighborhood Center, and the City of Madison. These festivals are the backbone of our associations' budgets; La Fete De Marquette is expected to raise more than 25% of Wil-Mar Neighborhood Center's operating costs. The Wil-Mar Neighborhood Center provides free emergency food programs to more than 200 individuals-many with young children or on fixed incomes-each week. More than 800 individuals access the Wil-Mar Neighborhood Center each week for low-cost or free childcare, family support groups, senior services and resources, multiple arts and culture classes, and safe and affordable meeting spaces. The Wil-Mar Neighborhood Center believes that these festivals directly connect on-going services with community participants, volunteers and sponsors. Funds raised from the Waterfront and Orton Park Festivals are directed to at-risk youth programs within the Wil-Mar Neighborhood Center, scholarships, home safety trainings and grants, green space preservation, and emergency relief assistance. The proposed policy changes could

significantly impact our neighborhood's ability to support these programs and services that are vital to the well-being of our community's residents, businesses, and charitable efforts. Currently, each event purchases a sound permit for \$100. This cost joins the costs of the park event scheduling fee, the costs of electricity and generators, the costs of permits to include vendors at the event, the costs of permits to sell beverages and food at the event, artist fees, the cost for sound equipment and sound engineers, the costs of renting tents, tables and other equipment, the costs of our promotional efforts, the expense of private security, and payment for required off-duty police officers.

The Proposed 2016 Public Amplification Permit Fees policy change creates three classes of permits. The third class of permit, meant for special events in city parks, will be the event permit necessary for La Fete De Marquette and the Waterfront and Orton Park Festival. This event permit grants an event sound permit for six hours and at no more than 85 decibels at the perimeter of the event. These proposed changes to the public amplification permits also include a dramatic fee increase. These fee increases would lead to an increase to \$850.00 for the Waterfront Festival's amplification permit fee, an increase to \$1,710.00 for La Fete De Marquette's amplification permit fee, and an increase to \$1,252.00 for Orton Park Festival's amplification permit fee.

Eighty-five decibels is defined commonly as a sound level that requires one to raise his or her voice to be heard over. We believe that an 85-decibel level maximum sound level at the perimeter of the event is a reasonable request; however, given the structure of our neighborhood parks, we must be able to work with the Parks department to establish a set location where decibel levels will be measured during the events. Currently, the perimeter of the event is defined as the terrace between the park sidewalks and the streets surrounding the park; this means that one such perimeter could be the intersection of Ingersoll Street and E. Wilson Street. Another point could be the intersection of E. Wilson Street and S. Few Street, and another point could be the intersection of the bike path and Brearly Street; using the current definition of the park perimeter, many other such points could be used to measure sound. Each of these spots would likely measure a different volume of sound.

In Central Park, the park was designed for a stage at the concrete pad located on Ingersoll Street. This concrete pad was built to prevent damage on the grass of the park; the slight upward slope of the park going east also means that hundreds of event guests over more than the two acres of the east side of the park can all watch the stage even as they move farther away. This built-in concrete pad also means that the main stage at La Fete De Marquette, the Central Park Sessions, Yum Yum Fest, and other events at Central Park is approximately 125 feet away from a part of the event perimeter at Ingersoll Street and E. Wilson Street. The shape and structure of Yahara Park and Orton Park necessitates that the stages at Waterfront and Orton Park Festivals are also less than 150 feet away from their event perimeters. The proximity of the stages to the event perimeters as defined within the current proposal mean that a reading of 85 decibels at potential points along the event perimeter would be very detrimental to the ability for the audience to hear and enjoy the music when not directly next to the stage. The scope of these festivals, the level of attendance, and the layout of these parks does not allow for reasonable enjoyment of music throughout the event grounds if the sound, due to the current definition of the perimeter, is limited to 85 decibels at the event stages.

We know that sound created in an outdoor venue is very hard to control; sound rises and falls depending on multiple factors outside human control, including wind, cloud cover, and surrounding buildings. In parks as large but as narrow as Orton Park, Yahara Park Place, or Central Park, multiple points can be chosen along their perimeters to measure sound levels, and all measurements could find different decibel levels, which can all also change throughout the event as the outside environment shifts. To address this issue, we suggest a set area to measure decibel levels at these parks during these events. This opportunity then allows for our sound engineers to manage their technical equipment so that as the factors outside our control change, we are able to adjust the sound being produced to keep the decibel level at or under the maximum of 85 decibels at the set point of sound measurement at the perimeter. We propose that these locations be set at the playground at Yahara Park, at the basketball court at Orton Park, and at the intersection of S. Few Street and E. Wilson Street at Central Park.

In summation, we ask:

- 1. Absent a reasonable rationale, that the commission reject the proposed fee increases and**
- 2. The decibel readings at these parks are taken at: the playground at Yahara Park, the basketball court at Orton Park, and the intersection of S. Few Street and E. Wilson Street at Central Park.**

We beseech the Park Commission to work with us on this serious matter. We look forward to working with you.

Sincerely,

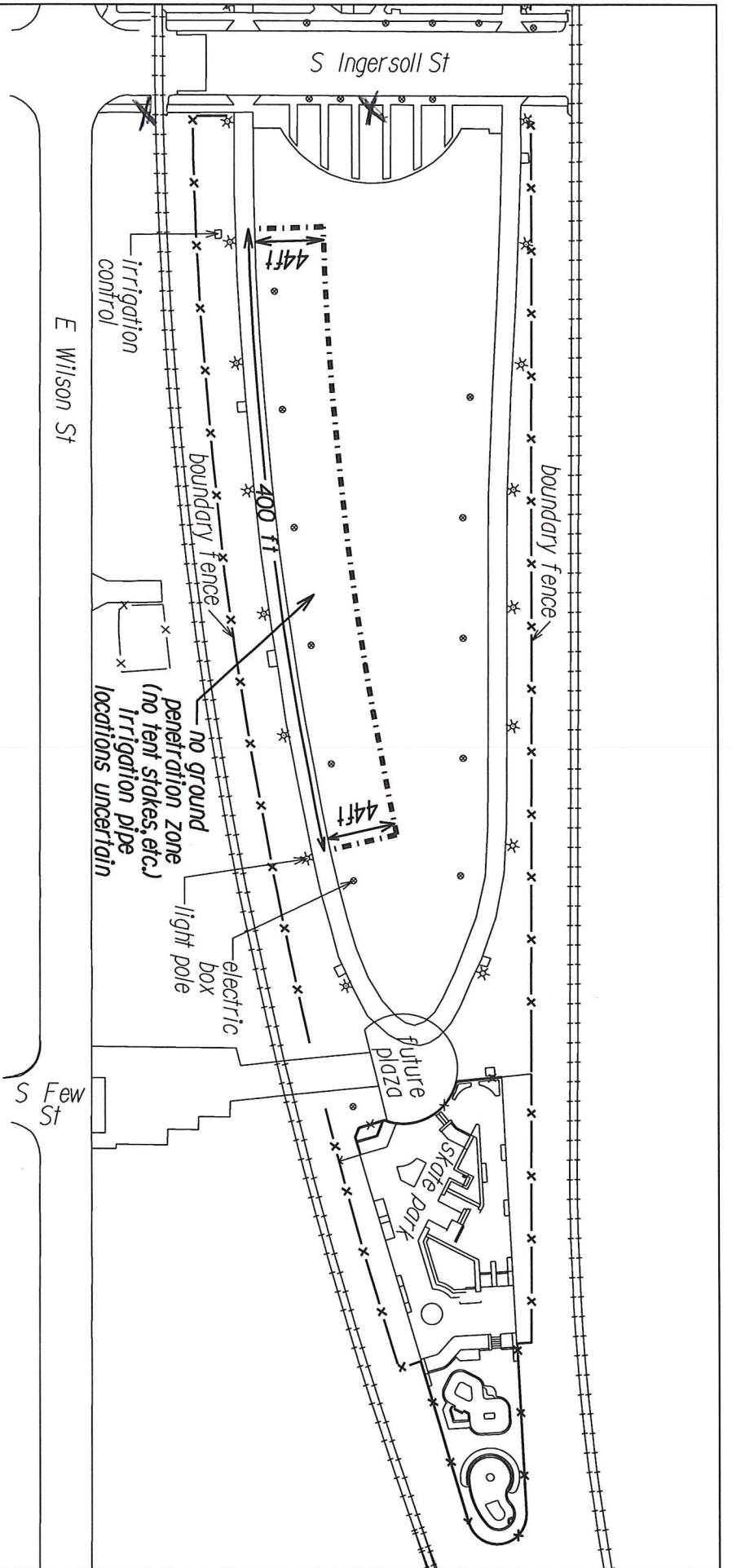
Marquette Neighborhood Association

Wil-Mar Neighborhood Center

Greater Williamson Area Business Association

MadCity Bazaar

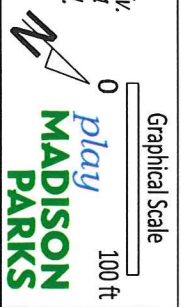
Let's Eat Out Food Cart Coalition



CAUTION: This park has many underground utilities owned by different entities. Before any ground penetration, including tent stakes, contact Diggers Hotline (phone 811 / www.diggershotline.com) and the Parks Division (266-4711) so that utilities are marked, and stay at least 18 inches away from marks. Thank you!

CENTRAL PARK EVENT MAP 2015
GREAT LAWN & SKATE PARK
201 S INGERSOLL ST (NE SIDE INGERSOLL)

City of Madison
 Dept. of Public Works - Parks Div.
 City-County Building, Suite 104
 210 Martin Luther King Jr. Blvd.
 PO Box 2987
 Madison, WI 53701-2987



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Agenda Item Number: 19 Topic: 40772
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|--|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input checked="" type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: RAY KUMADAYI Date: 11/18/15
 Address: 1096 DUNRANKIN WAY
 City: SUN PRACREE State: WI Zip Code: 53590
 Representing: AFRICAN ASSOCIATION OF MADISON
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

19th

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Agenda Item Number: 29 Topic: OUTDOOR FESTIVAL / DECIBEL
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: NICK COTTEN Date: 11-18-15
 Address: 3910 CALVERT RD.
 City: MADISON State: WI Zip Code: 53714
 Representing: _____
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

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Agenda Item Number: 19 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Steve Lodgen Date: 11/18/15
 Address: 2714 Summers Ave
 City: Madison State: WI Zip Code: 53704
 Representing: _____
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 19 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Sasha Mishra Date: 11/18/15
 Address: PO Box 95707
 City: Madison State: WI Zip Code: 53707
 Representing: Disability Pride
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): Fees are already expensive.
We are doing a lot of fundraising to
support a free Festival. this is an
asset to the city

Thank you for taking part in tonight's meeting.

1st

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Agenda Item Number: 19
40772 Topic: Sound/Fees
Do you have Handouts? Yes No

Please check the appropriate boxes:

- Support
- Oppose
- Neutral/No Opinion

and

- Wish to speak
- Do not wish to speak
- Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: DARREN STERNO Date: 11/13
 Address: 1048 E Johnson St
 City: MADISON State: WI Zip Code: 53703

Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

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Agenda Item Number:

19

Topic:

P (outdoor festivals) decim etc.

Do you have Handouts? Yes No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

Lucie Dimaggio

Date:

4/18/15

Address:

2714 Summers ave

City:

Madison

State:

WI

Zip Code:

53704

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

Thank you for taking part in tonight's meeting.

16th

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Agenda Item Number:

19

Topic: _____

Do you have Handouts? Yes

No

Please check the appropriate boxes:

- Support
- Oppose
- Neutral/No Opinion

and

- Wish to speak
- Do not wish to speak
- Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: Samantha Shaw Date: 11/18

Address: 513 Christianson Ave

City: Madison State: WI Zip Code: 53714

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

I oppose as it
is detrimental to our community,
Wilmar neighborhood center,
and other non-profit events.

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 19 Topic: AMPLIFIED SOUND
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: SCOTT B. TITORNTON Date: 11-18-2015
Address: 1104 JENIFER ST
City: MADISON State: WI Zip Code: 53703
Representing: SELF

If representing other than yourself, complete the back of this form.

Comments (please print clearly): THIS CHANGE IS NOT NEEDED & WOULD BE DETRIMENTAL TO EAST SIDE FESTIVALS. I LIVE ONE BLOCK FROM ORTON PARK AND 2 FROM CENTRAL PARK. THE MUSIC IS WONDERFUL & I DO NOT WANT IT CHANGED.

Thank you for taking part in tonight's meeting.

6th

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

WELCOME TO THIS MEETING OF THE MADISON BOARD OF PARK COMMISSIONERS

Anyone may speak or otherwise indicate support or opposition to items on tonight's agenda. You must register first. If you wish to register for more than one agenda item, complete a separate form for each item. Please turn forms in to the Secretary.

Note: All speakers registering a position to speak at a Park Commission meeting must have registered their request to speak prior to the introduction of that agenda item.

Agenda Item Number: 40772 Topic: Proposed 2016 Amplified Sound - PA Fees
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|------------|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: Diane Farris Date: November 18, 2015

Address: 3233 Thorp St

City: Madison State: WI Zip Code: 53714

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): Why are you messing with the best community activity Madison has?

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: 40772 Topic: Proposed 2016 Ampl. field sound
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|------------|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: Michael Moore Date: 11/18/15

Address: 3233 Thorp St.

City: Madison State: WI Zip Code: 53714

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: 19 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Kate Moran Date: 10/18/15
 Address: PO Box 70795
 City: Madison State: WI Zip Code: 53707
 Representing: Disability Pride Festival
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): Make the fees fulltime with
the budget of the festival. Music should be
at the level people can hear the music
Festivals general McOne to Madison

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: 19 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Ruth Toby Sigle Date: 11/18/15
 Address: 2450 Fairview St
 City: Blairton State: WI Zip Code: 53589
 Representing: Madison Disability Pride
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): OPPOSING increase on fees at
AT PARKS, vending ect. on grounds of the huge
impact it would have on event ATTENDANCE
& organizers, vendors ect.

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 40772 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|------------|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: John Campbell Date: _____

Address: 123 N. Blount St.

City: MADISON State: WI Zip Code: 53703

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): I fear this will jeopardize
the event that make Madison special
eg: le Fete, Central Park session, Yum Yum Fest
etc.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number:

40772

Topic:

amplified sound fees

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name:

Mitchell Nussbaum

Date:

11/18/11

Address:

1611 Madison St.

City:

Madison

State:

WI

Zip Code:

53711

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

Proposal as currently written
would diminish or destroy the festivals that
are a cherished part of Madison life & would
kill a source of funding for community organizations

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 40772 Topic: Describe? Limit
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|---|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input checked="" type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Matthew James Leaverton Date: 11-18-15
Address: 1425 Loftsgordon Avenue
City: Madison State: WI Zip Code: 53704
Representing: Matthew James Leaverton
If representing other than yourself, complete the back of this form.

Comments (please print clearly): planes are louder than their speakers/stereo

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number:

19

Topic:

Amplified Sound

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: Jeanie Verschay

Date: 11/17/15

Address:

3602 Atwood Ave.

City:

MADISON

State:

WI

Zip Code:

53704

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

~~Increase fees at party events~~

~~and there a negative impact~~

Presently, the groups try to work with the neighborhoods to be respectful & responsible.

Increase Thank you for taking part in tonight's meeting.

The fees would impact the positive effects the events are able to have supporting the community & making the events accessible.

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Agenda Item Number: Topic: Fees
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: VIRGINIA ROSE Date: 11.18.2015
Address: 349 KENSINGTON DRIVE
City: MADISON State: WI Zip Code: 53704
Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number:

Topic:

PARK FEST

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

JAY DROSTER

Date:

11/19/15

Address:

1302 SOUTH THOMPSON

City:

MAD

State:

WI

Zip Code:

53716

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

Choye

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 19 Topic: SOUND RESTRICTIONS
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|------------|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: TONY CASTANEDA Date: 11/18/15
Address: 156 TALMADGE ST.
City: MADISON State: WI Zip Code: 53704
Representing: SECF

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

22nd

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 19

Topic: Amplified Sound Fees
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input checked="" type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Marsha Cannon Date: 18 Nov. 2015
 Address: 400 Sidney St.
 City: Madison State: WI Zip Code: 53703
 Representing: _____
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

My name is Marsha Cannon. For 26 years I have lived at 420 Sidney Street, Madison. For 16 of those years there were no loud outdoor musical events. Until a few years ago, there was just one, La Fête de Marquette.

Now it seems like there's an amplified event nearly every summer weekend, some running for more than a day. We are beyond annoyed at being unable to enjoy our own backyard.

Thank you Madison Parks Division and Commissioners for your concern and action to establish reasonable rules and fees for amplified events in our public parks.

The proposed fees appear logical and fair, and they demonstrate that the Parks Division takes citizen input seriously. The fee schedule offers alternatives. A one-day event with a 75-decibel sound level and 9 PM end time is rewarded; a 4-day event at 85 decibels ending at 11 PM must pay for the privilege.

Event organizers . . . I urge you to consider your neighbors. Unwanted and unnecessary noise can affect everyone within at least a half-mile radius— including students trying to study, patients recovering from illness or surgery, and anyone needing to sleep.

Local nonprofits rely on neighborhood support. Over-amplified events signal disrespect for the neighbors and thus diminish that support. Good works alone fail to justify disturbing the neighbors for hours on end.

Ironically, the same people who are unhappy about new rules have been asked nicely more than once to lower the volume and end at a reasonable time. The consequence of ignoring legitimate complaints is a new set of rules.

As a recent email on the Tenney-Lapham listserv noted . . . we have laws and ordinances so people can live close together without conflict. I support the proposal because it will help keep the Isthmus alive, vibrant, and livable. Emphasis on *livable*.

18 November 2015

Marsha Cannon
420 Sidney St.
Madison, WI 53703
608.251.1276

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 40772 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- Support
- Oppose
- Neutral/No Opinion

and

- Wish to speak
- Do not wish to speak
- Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: Karen Jensen Date: 11/18/15
 Address: 1347 E Dayton #2
 City: Madison State: WI Zip Code: 53203
 Representing: _____
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): Please continue to approve all the festivals on the East side. They enhance the lives of people of all ages and ethnicities. This city sets itself apart by providing these eclectic and →

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 40772 Topic: Proposed 2014 AMP. Sound (PA) Fees
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: DARLENE BUTLER Date: 11-18-15
 Address: 2513 E JOHNSON ST
 City: MADISON State: WI Zip Code: 53704
 Representing: Self
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 40772 Topic: PA FEES
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input checked="" type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: T.R. Loon Date: 11-18-2015
Address: 1134 SPaight
City: MSN State: WI Zip Code: 53708

Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): 85 db for festivals was in place the summer of 2015 and was a GREAT improvement. I appreciate that these levels were determined scientifically by the city & county health departments.

I support the new fees for PA's - they seem much more equitable. OVER ->

9th

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: 19 Topic: AMPLIFIED SOUND/FEES
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|---|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input checked="" type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: SHARI DAVIS Date: 11/18/15
 Address: 5801 GEMINI DR. APT. 311
 City: MADISON State: WI Zip Code: 53718
 Representing: MADISON BLUES SOCIETY
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): MADISON BLUES SOCIETY PUTS ON
A YEARLY ALL-DAY CONCERT AT WARNER PARK.
THIS ISSUE IS IMPORTANT TO US, AND WILL AFFECT
OUR PROJECTS AND THOSE OF OTHER ORGANIZATIONS
LIKE US.

Thank you for taking part in tonight's meeting.

10/2



REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: 40772 Topic: Amplified Sound
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Christine Amey Date: 11-18-15
 Address: 410 Pawling St #2
 City: Madison State: WI Zip Code: 53704
 Representing: Self
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

11/4

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 40772 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input checked="" type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Leslie Petersen Date: _____
 Address: 2450 Upham St
 City: Madison State: UT Zip Code: 53704
 Representing: myself
 If representing other than yourself, complete the back of this form.

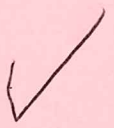
Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

13th

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: 19 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Rocio P. Martinez Date: 11-18-15
 Address: 106 50 Owen Dr.
 City: Madison State: _____ Zip Code: _____
 Representing: Hispanic United For Education
 If representing other than yourself, complete the back of this form.

Latino United For Educ Scholarship

Comments (please print clearly):

Any changes on current sound
policies will be detrimental to
ethnic integration and cultural
diversity due to
lost of festivals.

Thank you for taking part in tonight's meeting.

lost of festivals.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: 19 Topic: Decibel Levels
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Jeff Burkhardt Date: 11/18/15
 Address: 109 N G
 City: Madison State: WI Zip Code: 53704
 Representing: _____
 If representing other than yourself, complete the back of this form.

Comments (please print clearly): The proposal on amplified
sound should be opposed

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 40722 Topic: Amplified Sound
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input checked="" type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Peter Cannon Date: 11/18/15
Address: 420 Sidney St
City: Madison State: WI Zip Code: 53703
Representing: Self

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

My name is Peter Cannon. I live at 420 Sidney Street – about a half mile from Central Park, a mile and a half from Memorial Union.

I'd like to start by thanking the Parks staff for all the work that went into putting this proposal together. From my yard, the 85db limit imposed this past summer made a significant difference in my quality of life. I think it's still a bit loud. I could still hear the noise from events, but it rarely reached the level of objectionable. This is very unlike two summers ago when there was an evening where we had to raise our voices to chat with our neighbors while having dinner in the back yard -- a half mile from the event!

I would like to remind the board that there are health effects from loud noise. I wear hearing aids. For those of you who do not need them, you should know that my hearing aids do not correct my hearing to 20/20. They don't work well in noisy conditions and I still don't have very good high frequency hearing. Believe me, you don't want to wreck your hearing. But that's what every promoter here tonight is advocating. They want performances to be loud enough to cause hearing damage. Various people have talked about the good that the concerts do for the volunteer groups that run them. I'm not sure that the good outweighs the short and long term health impact. The National Institute for Occupational Safety and Health (NIOSH) recommends only 2 hours a day of exposure to sound levels at 90db and only an hour at 94db. Thus our neighborhood groups are exposing all their volunteers and attendees to damaging sound levels during the concerts.

In addition Dane County Public Health says on their web page: "However, before the levels of noise get loud enough to cause hearing loss, excess noise may lead to sleep disturbance, interference with communication, decreased school performance, increased levels of stress, and changes in social behavior. In addition to these risks, long-term exposures to loud noise have also been reported to increase the risk of hypertension and heart disease." These effects have been associated with levels of 70db and below – a level that spreads far beyond the event perimeter. This is what the noise from the many events held on the square and the isthmus may be doing to residents.

The highest permitted decibel level in the city code for day to day urban noise is 88db for construction noise. Why should concerts be higher?

As I said, I would like the sound levels even lower than the proposal before you, but I can live with this level as a compromise. Thank you.

Peter Cannon
420 Sidney St.
Madison, WI 53703
808-251-1276

Speak after Cary

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 19 Topic: SOUND
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|------------|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: STEVE SILVERBERG Date: 11/19/2015
Address: 1147 RUTLEDGE STREET
City: MADISON State: WI Zip Code: 53703

Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Representing Witman - Gary wishes to have Beatrice speak 1st

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

And then have Gary + others follow



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Agenda Item Number:

40772

Topic:

Proposed 2010 Amplified sound fees

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: Beatrice Hadidian

Date: 11/18/2015

Address: 953 Jennifer St.

City: Madison

State: WI

Zip Code: 53703

Representing: The Wil-Mar Neighborhood Center

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

WELCOME TO THIS MEETING OF THE MADISON BOARD OF PARK COMMISSIONERS ✓

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Agenda Item Number:

19

Topic:

PARKS PROPOSAL

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: BOB QUEEN

Date: 11/18/15

Address: 406 CLERMONT AVE

City: MADISON

State: WI

Zip Code: 53704

Representing: CENTRAL PARK SESSIONS

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

NOT SUBS WHERE THE FEES
CMB FROM BUT WHY WOULDN'T YOU
CUSTOMER INVOLVED. \$5 DB AT
PERIPHERY DOES NOT WORK

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: Topic: Amplified Sound
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Bruce Woods Date: _____
Address: 940 Spaight St.
City: Madison State: WI Zip Code: _____
Representing: ~~Wil-Mar~~ Wil-Mar
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number:

19

Topic: PROPOSED AMPLIFIED SOUND FIELDS

Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: MARK SAUNDERS Date: 11-18-15

Address: 2814 LAKELAND AVE, #1

City: MADISON State: WI Zip Code: 53704

Representing: MYSELF

If representing other than yourself, complete the back of this form.

Comments (please print clearly): THE MUSIC FESTIVALS ARE A HIGHLY TREASURED
PART OF MY SUMMER. THEY CREATE COMMUNITY & FUND THE WORK OF
NON PROFIT GROUPS

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: 40772¹⁹ Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Harris Lemberg Date: 11/18/15
Address: 1348 Spaight St
City: Madison State: WI Zip Code: 53703
Representing: Myself
If representing other than yourself, complete the back of this form.

Comments (please print clearly): STRONGLY OPPOSE!!!

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number:

40772

Topic:

Decibels & # of hours of

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

Line Music

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: Mary Ritchay

Date: 11.18.15

Address:

6909 Donna Dr.

City:

Middleton

State:

WI

Zip Code:

53542

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

I would like to see the public have a say in having live music ~~without~~ with reasonable sound & # of hours of concerts

Thank you for taking part in tonight's meeting.

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Agenda Item Number:

40772

Topic:

2016 Amplified Sound Fees

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

Deanne Funkhouser

Date:

11/18/15

Address:

411 S. Ingersoll

City:

Madison

State:

WI

Zip Code:

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

The Madison Music Festivals are
very important in bringing community together
& raising funds for various community groups.
It's important to keep these going.
Maybe permits could be tiered for non-profit groups vs.
for profit festivals

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 40772 Topic: Amplified Sound Fees
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Nicole Richmond Date: 11-18-15

Address: 416 N Fair Oaks Ave

City: Madison State: WI Zip Code: 53714

Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number:

Topic: _____

Do you have Handouts? Yes

No

Please check the appropriate boxes:

- Support
 Oppose
 Neutral/No Opinion

and

- Wish to speak
 Do not wish to speak
 Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Joanna Donovan Date: 11-10-15

Address: 1338 E Wilson

City: Madison State: WI Zip Code: 53703

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 19 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Albert Quattrone Date: 11/18/15
Address: 1338 E. Wilson St
City: Madison State: WI Zip Code: 53703
Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

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Agenda Item Number:

Topic:

Proposed 2016 Amplified Sound

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

Ashwini Rao

Date:

11/18/2015

Address:

201 2124 E. Main St

City:

Madison

State:

WI

Zip Code:

53704

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

Thank you for taking part in tonight's meeting.

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Agenda Item Number:

Topic:

Festivals

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name:

Maggie Weiser

Date:

11/18/15

Address:

4506 Hamlet Circle

City:

Madison

State:

WI

Zip Code:

53714

Representing:

(Self)

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

oppose pb limits & increased
fees for festivals

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 19 Topic: AMPLIFIED SOUND
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: STEVE SPERLING Date: 11/18/15
Address: 2090 ATWOOD AVE
City: MADISON State: WI Zip Code: 53704
Representing: BANKMORRE THEATRE
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number:

19

Topic:

40772

Proposed 2016 Amplified
SOUND FEES

Do you have Handouts? Yes

No

Please check the appropriate boxes:

- Support
- Oppose
- Neutral/No Opinion

and

- Wish to speak
- Do not wish to speak
- Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name: DAVE HAPLER

Date: 11-18-15

Address: 411 S. INGERSOLL ST

City: MADISON

State: WI

Zip Code: 53703

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

PLEASE DON'T LIMIT OR REDUCE THE DECIBEL
LEVEL OF OUTDOOR FUNDRAISING FESTIVALS. IT'S WHAT MAKES
MADISON A GREAT CITY & THE FESTIVALS ARE MAJOR FUNDRAISERS
FOR AREA NONPROFITS.

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number:

19

Topic:

Do you have Handouts? Yes

No

~~SECRETARY'S OFFICE~~

Please check the appropriate boxes:

- Support
 Oppose
 Neutral/No Opinion

and

- Wish to speak
 Do not wish to speak
 Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

JANATHON QUATHROGILL

Date:

11/18/2015

Address:

138E EAST WILSON

City:

MADISON

State:

WI

Zip Code:

53703

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number: 19

Topic: Skate park @ Oak Park - sorry
Do you have Handouts? Yes No

Please check the appropriate boxes:

Support
 Oppose
 Neutral/No Opinion

and

Wish to speak
 Do not wish to speak
 Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Jurgis Stalma Date: 11/18/15
Address: 931 Williamson St
City: Madison State: WI Zip Code: _____
Representing: Jonathon Quattrucci
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number:

Topic: _____

Do you have Handouts? Yes No

Please check the appropriate boxes:

- Support
 Oppose
 Neutral/No Opinion

and

- Wish to speak
 Do not wish to speak
 Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

Danny Meyer

Date:

11/18/15

Address:

510 Winton Pl

City:

Madison

State:

WA

Zip Code:

53104

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Agenda Item Number: 40772 Topic: 2016
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Steve Robertson Date: 11/18/15

Address: 6041 Hogan Rd

City: Wauwakee State: WI Zip Code: 53597

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number:

40772

Topic: PROPOSED AMPLIFIED SOUND FEES

Do you have Handouts? Yes No

Please check the appropriate boxes:

- Support
 Oppose
 Neutral/No Opinion

and

- Wish to speak
 Do not wish to speak
 Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly:

Name:

TONY MILLER

Date:

11/18/15

Address:

121 DUNNING ST

City:

MADISON

State:

WI

Zip Code:

53704

Representing:

MYSELF

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

HAVE YOU CONSIDERED RETRACTABLE
(AND COLORFUL) SOUND CURTAINS FOR
THE "OFFENDING" PORTALS OF PARKS
(SUCH AS ORTON, WATERFRONT + CENTRAL)?

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS



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Note: All speakers registering a position to speak at a Park Commission meeting must have registered their request to speak prior to the introduction of that agenda item.

Agenda Item Number: 19 Topic: Proposed Amplified Sound
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Mike Engel Date: 11-18-15
Address: 826 Seneca St
City: Madison State: WI Zip Code: 53703
Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): Neighborhood events supporting not for profit organizations fulfill Madison Parks Mission "to provide opportunities for cultural interaction by facilitating community & ethnic festivals"

Thank you for taking part in tonight's meeting.

REGISTRATION OF POSITION BEFORE THE MADISON BOARD OF PARK COMMISSIONERS

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Agenda Item Number:

19

Topic:

Proposed sound Fees

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

Sybil Augustine

Date:

11-18-15

Address:

149 Talmadge St

City:

Msn

State:

WI

Zip Code:

53704

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

? You've been working on this for a year and this is the first people get to hear of it? (What a) shame. Increased fees will be arbitrarily applied in such subjective situations. Many people depend on revenue raised at these larger events, as well as enjoy them, because of the community groups & centers they benefit.

Thank you for taking part in tonight's meeting.

So the events will not be shortened and nothing will change for people who complain. The city just gets more money.

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Agenda Item Number:

19

Topic:

PA Fees

Do you have Handouts? Yes

No

Please check the appropriate boxes:

Support

and

Wish to speak

Oppose

Do not wish to speak

Neutral/No Opinion

Available to answer questions

- Though my have to leave

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

Fred Schepartz

Date:

11/18/15

Address:

149 Talmadge

City:

Madison,

State:

WI

Zip Code:

53704

Representing:

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

①

I drive for Union Cab. Have for 27 years. Last summer was worst in at least 10 years. These festivals provided much needed business, especially ones at Central Park where organizers let us set up a make-shift taxi stand.

Thank you for taking part in tonight's meeting.

② Very concerned That 85 lb is unreasonable.
That's not bad at all. Frankly, I have ties
looser than that.

③ Time limit is unreasonable, and would greatly impact
so many of our great events, especially Great Taste of
the Midwest, which provides operational funds for
Madison Homebrewers; Toasters Guild and all the great work
they do. Also, Great Taste donates money from event
to WORT.

④ ~~May be the events~~ Events generate money to
non-profits that need every cent they can get.
Increase fees takes money away from non-profits.

⑤ Related to previous point, reminds me of proposal
to increase fees for restaurant sidewalk cafes. I
get that city needs to find additional revenue.
Thanks to State's reductions in shared revenue.
However, increased sidewalk cafes means expense
will be passed on to consumers. This proposal will
mean that other expenses will have to be passed onto
attendees, but we want to keep expenses low so they
can be for everyone. Or proceeds to non-profits will be
reduced.

⑥ These festivals are a big part of what makes
Madison special. Don't screw it up.

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Agenda Item Number: 19 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input checked="" type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Renee Lauber Date: _____

Address: 1252 morrison ct

City: Madison State: WI Zip Code: 53703

Representing: Marquette Neighborhood Association
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 40772 Topic: _____
Do you have Handouts? Yes No

Please check the appropriate boxes:

- Support and Wish to speak
 Oppose and Do not wish to speak
 Neutral/No Opinion Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: JACK KEAR Date: 11/18/15
Address: 1045 E Wilson St - My front yard is Central Park
City: _____ State: _____ Zip Code: _____
Representing: closest resident to Fete, Yum Yum Fete + event in Central Park
If representing other than yourself, complete the back of this form.

Comments (please print clearly): Please make a system with more freedom not less. Our festivals benefit so many small neighborhood groups + causes that fee + hour changes can mean lesser known bands + smaller attendance. These events need to be protected not diminished and critics to the few days when volume of music continues

Thank you for taking part in tonight's meeting.
until 11PM should do what myself + my neighbor do and that is put out a chair + enjoy it!

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Agenda Item Number: 40772 Topic: Amplified Sound
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Judith A. James Date: 11/18/15

Address: 118 S. Marquette St.

City: Madison State: WI Zip Code: 53704

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): I strongly oppose anything that
threatens our wonderful festivals. I chose to buy my
home on the east side b/c of the wonderful sense of

community. This community is strengthened & enriched
by our festivals. Thousands of people love and

Thank you for taking part in tonight's meeting.
enjoy the festivals, a small handful complain about
the "noise" Noise is part of living in an urban
area. The festivals are also an important part of the

economy of our community. Many musicians & food vendors rely on the festivals, as do the Wilmar & Goodman Community centers. I strongly oppose any restrictions to sound levels and oppose increased fees.

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Agenda Item Number: 19. 40772 Topic: Proposed 2016 Amplified Sound ..
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Sean Ottosen Date: 11/17/15

Address: 2329 E. Johnson St.

City: _____ State: _____ Zip Code: 53704

Representing: Wil-Mar Neighborhood Center (Board of Directors)
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 19 Topic: Festivals
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Zach Richmond Date: 11/11/15
Address: 416 N Fair Oaks Ave
City: Madison State: WI Zip Code: 53714

Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.

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Agenda Item Number: 40772 Topic: Proposed 2016 Amp. Sound (PA) Fees
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input checked="" type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Rainbow Manifrog Date: 11/18/15
Address: 2132 Fordem Ave.
City: Madison State: WI Zip Code: 53704

Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): I moved here from CA and the free summer festivals was a strong draw. I have family & friends that visit me from IL, CA & TX just to participate in the festivals. Please don't ruin one of the best things about living here!

Thank you for taking part in tonight's meeting.

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Agenda Item Number:

19/40772

Topic:

Amplified Sound PA fees

Do you have Handouts? Yes No

Please check the appropriate boxes:

- Support
 Oppose
 Neutral/No Opinion

and

- Wish to speak
 Do not wish to speak
 Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

Eileen Doyle

Date:

Nov 18, 2015

Address:

605 S Ford

City:

MADISON

State:

WI

Zip Code:

53708

Representing:

self / neighborhood / music festivals

If representing other than yourself, complete the back of this form.

Comments (please print clearly):

I've lived 27 years on Orion Pl -

I have no desire to see these responsible Festival
planners / participants to pay more \$ to raise
winds & neighborhood consciousness / connectedness toward
entertainment / togetherness / fundraising

Thank you for taking part in tonight's meeting.

Please? How bout deal with sound of Iron Man / Food
fest

which shook my house til 12 am
& 2am very recently Thanks

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Agenda Item Number: 40772 Topic: Proposed 2016 Amplified Sound
Do you have Handouts? Yes No

Please check the appropriate boxes:

- | | | |
|---|-----|--|
| <input type="checkbox"/> Support | and | <input type="checkbox"/> Wish to speak |
| <input checked="" type="checkbox"/> Oppose | | <input type="checkbox"/> Do not wish to speak |
| <input type="checkbox"/> Neutral/No Opinion | | <input type="checkbox"/> Available to answer questions |

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name: Daniel Hobson Date: 11-18-15
Address: 1409 Ruffledge St.
City: Madison State: WI Zip Code: 53703

Representing: _____
If representing other than yourself, complete the back of this form.

Comments (please print clearly): Please do not increase fees
for our festivals.

Thank you for taking part in tonight's meeting.

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Agenda Item Number:

19

Topic: _____

Do you have Handouts? Yes No

Please check the appropriate boxes:

- Support
 Oppose
 Neutral/No Opinion

and

- Wish to speak
 Do not wish to speak
 Available to answer questions

SPEAKERS WILL HAVE A 3 MINUTE TIME LIMIT!

Please Print Clearly: Name:

SILVERBERG
STEVE SILVERBERG

Date:

11/18/2015

Address:

1147 RUTLEDGE ST

City:

MADISON

State:

WI

Zip Code:

Representing: _____

If representing other than yourself, complete the back of this form.

Comments (please print clearly): _____

Thank you for taking part in tonight's meeting.