

PARK EVENT PERMIT APPLICATION

EVENT INFORMATION

Name of Event: The Progressive Fighting Bob Festival
Park Requested: Breese Stevens Field Date Requested: 9/19/2015 Estimated Attendance: 3500-5000

EVENT ORGANIZER/SPONSOR INFORMATION

Name of Organization: Madison Mallards
Is Organizer/Sponsor a 501(c)3 non-profit agency? Yes No
MANDATORY: State Sales Tax Exemption Number: ES#: _____
OPTIONAL: Federal Tax Exempt Number: _____
Primary Contact: Vern Stenman Work Phone: 608-246-4277
Address: 2920 N Sherman Ave Madison, WI 53704 Phone During Event: 608-575-4267
Email: vern@mallardsbaseball.com FAX: _____
Organization or Event Website: _____

EVENT SCHEDULE

Date(s) of Event: 9/19/2015 Event Start and End Times: 9:00am-6:00pm
Rain Date (if any): N/A Set-Up Start Time: 9/18/2015
Take-Down Start Time and End Times: Immediately
following event. _____

Does this require time in the park the day before your event? Yes No
If Yes, provide details of times and area requested: 9/18/2015
Are you requesting use of the park shelter? Yes No

PERMITS

Will you have amplified sound at this event? Yes No
(If Yes, please fill out an Amplification Permit Application.)
Will you sell anything in the park? Yes No
(If Yes, please fill out a Park Event Vending Permit Application.)
Will you serve any food or beverage? Yes No
If Yes, what: Ballpark food, soda, water, beer.
Will you sell beer/wine? Yes No
(If Yes, please fill out a Beer/Wine Sales Permit Application.)
Will you put up any temporary structures, such as tents, stages, inflatables, dunk tanks? Yes No
(If Yes, please fill out a Park Event Temporary Structure Permit Application.
Note that permits are not required for 10' x 10' pop-up tents.)

APPLICATION SIGNATURE

The applicant for a Park Event Permit shall agree to indemnify, defend, and hold the City and its officers, officials, employees and agents harmless against all claims, liability, loss, damage, or expense incurred by the City on account of any injury to or death of any person or any damage to property caused by or resulting from the activities for which the permit is granted.

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.

Applicant Signature _____ Date _____