

STREET USE PERMIT APPLICATION

EVENT INFORMATION

Name of Event: Downtown Madison Family Halloween-Hayrides around the Capitol Square with Madison Parks Division

Event Organizer/Sponsor: Tracey Hartley, Recreation Services Coordinator – City of Madison Parks Division

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

MANDATORY: State Sales Tax Exemption Number: ES#: _____

OPTIONAL: Federal Tax Exempt Number: _____

Address: 1402 Wingra Creek Pkwy

City/State/Zip: Madison, WI 53713

Primary Contact: Tracey Hartley Work Phone: 608-267-4919

Email: thartley@cityofmadison.com Phone During Event: 608-209-7980

Website: https://www.cityofmadison.com/calendar/halloween-hayrides-around-the-capitol-square-0

Secondary Contact: Michelle Morrison Work Phone: 608-512-1342

Email: programs@visitdowntownmadison.com Phone During Event: _____

Annual Event? Yes No

Charitable Event? Yes No

If Yes, Name of charity to receive donations: _____

Estimated Attendance: 300+ (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Public Amplification? (not allowed after 11 p.m.): Yes No

Hours: _____ to _____

EVENT CATEGORY

Run/Walk Music/Concert Festival Rally Parking (i.e., bagging meters)

Other: Hayrides around the square Request 4 Parking spots -2 tractors and 2 hay wagons will need a place to park

LOCATION REQUESTED

Capitol Square (note specific blocks below) State St. Mall/800 State Street

30 on the Square (aka top of 100 block of State Street) Other (specific blocks/streets requested below)

Street Names and Block Numbers: in front of Grace Episcopal Church 10 N. Carroll St. –request to bag meters at 12pm

EVENT DATE(S)/SCHEDULE

Date(s) of Event: Wed. Oct. 26, 2022 Event Start and End Times: 3-6pm

Rain Date (if any): None Set-Up Start Time: 1pm setup

Take-Down Start Time and End Times: 6-7pm

TAKE-DOWN TIME: START TO STREETS REOPENED

Will sponsor apply for temporary class B license to serve or sell beer/wine for this event? Yes No

If class B license is denied, will the event(s) occur? Yes No

_____ By initialing, I/we waive the 21-day decision requirement.

APPLICATION SIGNATURE

BY SIGNING THIS APPLICATION, THE "EVENT ORGANIZER/SPONSOR" LISTED ABOVE AGREES 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.

Applicant Signature: 

Date: 9/30/2022

