

STREET USE PERMIT APPLICATION

EVENT INFORMATION

Name of Event: Relay For Life of UW-Madison

Event Organizer/Sponsor: Colleges Against Cancer, American Cancer Society

Is Organizer/Sponsor a 501(c)3 non-profit agency?

☒ Yes ☐ No

MANDATORY: State Sales Tax Exemption Number:

ES#: 13-1788491

OPTIONAL: Federal Tax Exempt Number:

Address: 8317 Elderberry Rd.

City/State/Zip: Madison/WI/53717

Primary Contact: Camilla Jackson

Work Phone: 608-662-7548

Email: Camilla.Jackson@Cancer.org

Phone During Event: _____

Website: _____

FAX: _____

Secondary Contact: _____

Work Phone: _____

Email: _____

Phone During Event: 617-335-9626

Annual Event?

☒ Yes ☐ No

Charitable Event?

☒ Yes ☐ No

If Yes, Name of charity to receive donations: _____

Estimated Attendance: 1000

(CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Public Amplification? (not allowed after 11 p.m.):

☐ Yes ☒ No

Hours: _____ to _____ (everything is inside 1430 monrveit)

EVENT CATEGORY

☐ Run/Walk

☐ Music/Concert

☐ Festival

☐ Rally

☒ Parking (i.e., bagging meters)

☒ Other: Indoor fundraiser (games, music, entertainment)

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: 1400 Block, Monroe St.

(for Food truck parking)

EVENT DATE(S)/SCHEDULE

Date(s) of Event: APRIL 7 - 8

Event Start and End Times: 6PM - 2AM

Rain Date (if any): n/a

Set-Up Start Time: 3PM

Take-Down Start Time and End Times: 2AM

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?

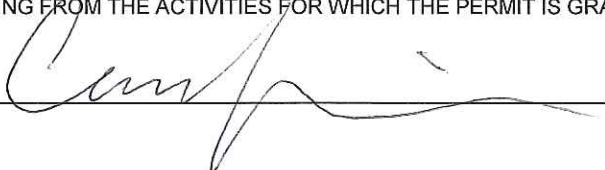
☐ Yes ☒ No

_____. 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

03/17/17