

Are you applying for a NEW park event? Are you applying for a returning park event with signi	ficant changes?	X Yes ☐ Yes	□ No XI No
EVENT INFORMATION Name of Event: The CrossFit Games		A part of a displaced by the second	
Park Requested: Quarin park for the whole week and pos-	sible the week before for setup.	and Olin Park	
Small area at Olin, Tenny, Brittingham, Law Park, and Tria affect	angle Park Near Olin that would	n't affect or would ha	ve minimal
Estimated Attendance: 1,000			
Type of Event (run/walk, fundraiser, festival, etc): Fitnes	s Competition and Exposition		
EVENT ORGANIZER/SPONSOR INFORMATION Name of Organization: CrossFit. Inc. and Reebok as the 3	Title Sponsor of the Event		
Is Organizer/Sponsor a 501(c)3 non-profit agency? MANDA	TORY: State Sales Tax Exemp	☐ Yes otion Number: ES#	x No
Primary Contact: <u>Timothy Chan</u> Address:3218 <u>Lakeside Drive</u> , <u>Presscott</u> , AZ 86301 Email: <u>tim_chan@crossfilgames.com</u>	Work Phone: <u>61</u> Phone During E	19- <u>944-3302</u> vent: <u>619-944-</u> 3302	
Organization or Event Website: http://games.cros	ssfrt.com		
EVENT SCHEDULE			
Date(s) of Event August 3rd - 6th 2017	Event Start and End Time	s: throughout the w	wik_
Rain Date (if any): NA	Set-Up/Take-Down Start/	End Times: <u>8/2-8/6.</u>	2017.
Does this require time in the park the day before your eve If Yes, provide details of times and area requeste impact the boat launches. Boat launches would be affects	ed: On 8/2 we will setup a small	x Yes trailer and box truck.	☐ No This will not
PERMITS			
Will you have amplified sound at this event? If yes, please fill out an Amplification Permit Appli	ication (page 13)	x Yes	(No
Will have any temporary structures such as tents, stages,		x Yes	□ No



If yes, please fill out a Temporary Structure Permit Application (page 14) Note that permits are not required for 10' x 10' pop-up tents		
Will you sell anything event?	Yes	x No
If yes, please fill out a Vending Permit Application (page 15)	d Southead	A 11,450
Will you serve any food at this event?	□Yes	x No
If yes, what will be served:		
Will you self alcohol (been/wine) at the event?	☐ Yes	x No
If yes, please fill out an Alcohol (Beer/Wine) Sale Permit Application (page 15)		G 1196
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APPLICATION SIGNATURE THE APPLICANT FOR A PARK EVENT PERMIT SHALL AGREE TO INDEMNIFY, DE AND ITS EMPLOYEES AND AGENTS HARMLESS AGAINST ALL CLAIMS, LIABILITY, LO INCURRED BY THE CITY ON ACCOUNT OF ANY INJURY TO OR DEATH OF ANY PERPROPERTY CAUSED BY OR RESULTING FROM THE ACTIVITIES FOR WHICH THE PER	OSS, DAMAGE, C ERSON OR ANY I ERMIT IS ISSUED	REXPENSE DAMAGE TO
The organization or person to which a permit is issued will be responsible for the conduct of the permitted area, and actual fees for services provided. Falsification of information on the forfeiture of up to \$200 per falsified item.	t the event, the co application will re	ndition of sult in
Applicant Signature_Time Chan	5-5-17	ŗ.





Please provide a brief narrative of the event. The CrossFit Games are the world's premier test to find the Fittest on Earth. They are world-renowned as a grueling test for the toughest athletes on Earth as well as a thrilling experience for spectators. Since its inception in 2007, the CrossFit Games have become "one of the fastest growing sports in America," according to Forbes

EVENT SCHEDULE

The schedule begins when event setup starts and ends when cleanup of the event area is complete, all equipment is removed and the park is available for regular use.

The schedule should encompass all activities planned for the event, including but not limited to:

- General: set up, hours of operation, lear down/cleanup, leave park
- Vending: when vendors will set up, hours of operation, tear down/cleanup, leave park
- Music/Performances: stäge setup, performance schedule, tears down/cleanup, leavé park
- Displays, Exhibits, Demonstrations: sotup, open hours, tear down, leave park
- Run/Waik/Parade, etc.: when staging starts, start time(s), end time(s), cleanup, leave park

EXAMPLE	EXAMPLE
8:00 a.m.	Setup
8/2/17	Production setup, restrooms, trash. Ramps can stay open. Only asking for some parking spaces to be closed.
8/3/17	Competition from 9am-2pm, Ramps closed from 12am-2pm
8/4/17	Competition from 9am-2pm. Ramps closed from 12am-2pm
8/5/17	Competition from 9am-12pm. Ramps closed from 12am- 12pm
8/6/17	Competition from 9am-12pm. Ramps closed from 12am- 12pm. Tear down complete by 12pm.
7/31-8/7	Display located at Olin Area Triannglo, Law park and Tenney Park. Assembly on 7.31 and tear down on 8.7
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Will you be providing your own receptacles?	s No
If yes, which receptacles and how many?	
Recycling Bins:	
Trash Bins:	
Oumpsters:	
If yes, name/contact information of collection agency	
providing equipment and service:	
Will you be renting additional Parks receptacles? If Yes, please continue. If No, skip the remainder of this form.	X No
Event/Name of Group: The CrossFit Games Park Name: Quano park for the whole week and possible the week before for setup and Of	in Park
Please indicate quantity of trash barrels: 0 8 barrel minimum: Each increment of up	to a parters \$120
Please indicate quantity of dumpsters: 0 per dumpste	r, and per tip: \$300



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Below is the standard Emergency Action Plan required by the City of Madison. Please complete the form with your event information.

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The CrossFit Games will be held August 1-6, 2017 at Quann and Olin Park

EVENT NAME DATE GENERAL LOCATION ADDRESS PARK NAME

II. PURPOSE

- A. This emergency action plan predetermines actions to take before and during the "EVENT NAME" (heroinafter referred to as the event) in response to an emergency or otherwise hazardous condition. These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for and those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include, but are not limited to, Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

III. ASSUMPTIONS

The possibility of an occurrence of an emergency is present at this event. The types of emergencies possible are various and could require the response of Fire & Rescue, Emergency Medical Services, and Police.

IV. BASIC PLAN

A. Emergency Action Plan (EAP) Event Representative

 The EAP event representative will be identified as the point of contact for all communications regarding the event. This person is identified as PRIMARY CONTACT: FIRST/LAST NAME.

B. Emergency Notification

- In the event of an emergency, notification of the emergency will be through the use of 911. The caller should have the following information available to the 911 operator: nature of emergency, location, and contact person with callback number.
- 2. We will not have on-site EMS. Owen Valuch 415-254-8533

CONTACT NAME/CELL NUMBER

3. We will will not have on-site Police or Security. Andy Rios 805-432-5224

CONTACT NAME/CELL NUMBER

C. Severe Weather

- Weather forecasts and current conditions can be monitored through the <u>National Weather</u> Service's <u>Madison Weather Forecast website</u>.
- 2. Before the event If severe weather is predicted prior to the event, the EAP event representative will evaluate the conditions and determine if the event will remain scheduled. The EAP event representative or his/her designee will be identified as such FIRST/LAST NAME and will be responsible to monitor the weather conditions before and during the event.
- During the event If severe weather occurs during the event, the EAP event representative or his/her designee FIRST/LAST NAME will make notification to those attending the event that a hazardous weather condition exists and direct them to shelter.
- 4. There are very limited provisions for sheltering participants in the event of severe weather.





 This event will follow the 30-30 Rule for lightning. If lightning is observed and thunder is heard within 30 seconds, the event will be delayed until 30 minutes have passed since thunder was last heard.

D. Fire

- If a specific hazard has been identified as an increased risk of fire at this event, event manager will work with the Fire Department to determine how to address the hazard.
- All event staff will be instructed on the safe use of Portable Fire Extinguishers.
- 3. If cooking is intended, you must contact the fire department and
 - a) Must have a valid fire extinguisher, 2A10BC
 - Each space is allowed 1 LP tank per cooking device. All LP tanks are to be secured in an approved manner (fied, strapped, chained, etc.)
 - No cooking shall be allowed under a tent. Cooking shall be a minimum of 20' away from tents/canopies.
 - d) Cooking must be on a non-combustible surface (grease collection material generally required under cooking and lood service areas)
- Fire Inspectors may be required to do an inspection of your event (depends on size and nature of the event), contact the Fire Department for guidelines
- 5. All tents/canopies used for cooking shall have a FLAME SPREAD Certification attached to the tent.
- 6. Should an incident occur that requires the Fire Department, 911 will be utilized to request this resource. The caller should have the following information available to the 911 operator: nature of emergency, location, and contact person with callback number.

E. Medical Emergencies

- As with any outdoor event, there is potential for injury to the participants. The types of injuries are various and include those that are heat related as well as traumatic injuries.
- Event manager shall contact the Fire Department to determine if there is a need for on-site Emergency Medical Services at this event.
- Should an incident occur that requires Emergency Medical Services to be called to this event, the caller will have the following information available to give to the 911 Center:
 - a) nature of emergency
 - b) precise location
 - c) contact person with callback number

F. Law Enforcement

1. The need for constant Law Enforcement presence at this event

has / has not been identified. Event manager shall contact the Police
Department to determine if there is a need for Law Enforcement presence at this event

- Should an incident occur that requires Law Enforcement, to be called to this event, the caller will have the following information available to give to the 911 Center:
 - a) nature of emergency
 - b) precise location
 - c) contact person with caliback number

G. Emergency Vehicle Access

- Access for Emergency Vehicles will be maintained at all times.
- 2. 20' Fire Lanes are required to be kept open at events.



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- 3. A 14' minimum height clearance requirement for anything that goes over a street or fire lane
- Participants and spectators will be directed to park in approved areas and not to obstruct
 protective features, sidewalks or public throughways.
- 5. Crowd control will be managed by: NAME.
- 6. Parking for vendor and staff vehicles will be; LOCATION(S).
- Parking for attendee vehicles will be: LOCATION(S).

V. CONTACT INFORMATION

CONTACTINEONMA		A A A A A A A A A A A A A A A A A A A
Primary Contact	Trn Chan	Cell 819-944-3302
Secondary Control	Owen Valuch	Cell. 415-254-8533
Emercency	Dane County 911 Center	911
Non-Emergency	Madison Fire Department	(608) 266-4420
Non Emergency	Madison Police Department	(608) 255-2345



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Requirement of a Certificate of Insurance will be noted on the Permit Conditions for your event (example pg. 4)

- The City's Risk Manager determines whether a Certificate of Insurance is required for an event.
 - The determination is based on the risk level of an event.
 - Risk level is determined by such things as, but is not limited to:
 - · Activities planned for the event
 - Anticipated attendance
 - Been'alcohol
 - Potential for injury
 - Size and nature of the event
- If a Certificate of Insurance is required, the event organizer must:
 - Submit a general liability insurance policy certificate
 - 30 days prior to the event date
 - In the amount of \$1,000,000
 - Naming the City of Madison as Additional Insured.
 - If alcohol (beer/wine) will be sold, this certificate must include liquor liability
- Submit official certificate by mail, email, or fax to the City of Madison Risk Management Office

City Risk Manager

210 Martin Luther King, Jr. Blvd., Rm. 406

Madison, WI 53703 Phone: (608) 266-5965 Fax: (608) 267-8705

Risk Manager Edial eveum@calyofmadison.com kbentley@calyofmadison.com mlloyd@calyofmadison.com

INDEMNIFICATION CLAUSE FOR PERMITS

THE APPLICANT FOR A PARK EVENT PERMIT SHALL AGREE TO INDEMNIFY, DEFEND, AND HOLD THE CITY AND ITS 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 ISSUED. THE ORGANIZATION OR PERSON TO WHICH A PERMIT IS ISSUED WILL BE RESPONSIBLE FOR THE CONDUCT OF THE EVENT, THE CONDITION OF THE PERMITTED AREA, AND ACTUAL FEES FOR SERVICES PROVIDED. FALSIFICATION OF INFORMATION ON THE APPLICATION WILL RESULT IN FORFEITURE OF UP TO \$200 PER FALSIFIED ITEM.



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

Would you like your event included on the Parks Division Event Calendar? xSome CrossFit Games events are confidential and not announced till the day before. If Yes, please continue. If No, skip this form.	Yes	X No
PARKS DIVISION CALENDAR OF EVENTS		
Your event will only be included on the calendars if all permits and applications are approved 30 days and your event is open to the public.	in udvar	nce
Official Name of Event:		
Park Location:		
Public Contact Phone:		
Website:		
Admission Cost:		
Date of Event		
Seginning/End Time of Event:	*	
Two sentence description of event:	2245588 4500000000000000000000000000000000	
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Will there be amp If Yes, please confi	lification at the event? Inue. If No, skip this form.	X	Yes	No□	
By Ordinance, pub be considerate of p	lic amplification is not allowed in City Pa ark neighbors and other park users.	irks except by permission from t	he Parks D	vision. Please	
Event/Name of Gro	oup: <u>The CrossFit.Games</u>			1	
Type of Amplifie	d Sound:				
BanŪ	DJ 🕅 Souhd System	Spe Ed nes/Announcem	ents	Karáoke	
Oth é ÉÍpleasi	e specify):_				
SOUND DURAT	TION INFORMATION				
DATE	TYPE	TIME SOUND BEGINS	TIME S	OUND ENDS	
8/3/17	PA Announcements DJ Music	8:30AM	2pm		
8/4/17	PA Announcements DJ Music	8:30 am	2pm		
8/5/17	PA Announcements DJ Music	8:30 am	12pm		
8/6/17	PA Announcements DJ Music	8;30 am	12pm		

Public Amplification permit type is determined by Parks Staff.

Public Amplification Permit 1 - (PA1)

- Sound Limit: 75 dB, 150 ft from the source.
- Time Limit: Between 8 AM and 9 PM, 6 hour duration
- Permit Fee: \$60
- Additional Hour(s) between 8AM and 10PM (9PM for Shelter Reservations): \$20
- Extraordinary extension to 11 PM (requires Park Commission approval): \$50
- Special Conditions:
 - Two 6 hour permits can be purchased on a day.
 - No carryover of hours unused on one date may be applied to a second date.
 - Ranger staff will monitor events for compliance.

Public Amplification Permit 2 - (PA2)

- Sound Limit: 95 dB at the sound board or 100 ft from source, whichever is closer.
- Time Limit: Between 8 AM and 10 PM, 6 hour duration
- Permit Fee: \$100
- Additional Hour(s) between 8 AM and 10 PM: \$20
- Special Conditions:
 - o PA1 Conditions apply
 - Ranger staff will monitor events for compliance at the perimeter and/or 125 ft from the source and at the sound board if applicable.
- Non-compliance action
 - A warning will be given to comply with the conditions of the permit. If a second warning is required, a citation will be issued to the responsible party for violation of MGO 8.29. A third violation will result in the



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amplification being ordered to cease immediately.



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Will temporary structures be set up at the event?

If Yes, please continue. If No, skip this form.

X Yes No

Temporary structures include, but are not limited to tents larger than 10' x 10', staging, traiters, inflatables or anything that is staked into the ground.

Diggers Hotline, 811 or 1-800-242-8511

You may call Diggers Hotline up to 30 days and no less than 10 business days before your event to schedule their work. Their work must be done no more than 10 days before your event. You MUST meet this timeline. They will ask for an address—please also tell them specifically that this is a park and give them the name of the park. Diggers Hotline will assign you a Ticket Number.

Inflatable Vendors

The agency from which you rent an inflatable must have its merchandise approved subject to SPS 334. You will need to confirm this with your vendor and provide the Parks Division with a copy and/or proof of the associated documentation.

Tents and Canopies Permit

Required for tents in excess of 400 sq. ft. An application is available online: www.cityofmadison.com/fire/code/dol/NeedAPermit.cfm, (608) 266-4457.

Event/Name of Group: The CrossFit Games

TEMPORARY STRUCTURE INFORMATION

What type of temporary structure do you plan to have?

TEMPORARY STRUCTURE	QUANTITY	
Staging		
Tent		
Trailer	1	A0' x 10' Office trailer
Inflatable		
Other		Boxtruck + restrooms

Company installing the structure(s):__



Will vending of any type occur at your event? If Yes, please continue. If No, skip this form		X	Yes	Nö
Park Event Vending Permits are required to sell anyth number of vendors and the number of days vendors v	ning in a City Park. The fee for this license i will be at the event.	s depe	ndent o	n the
Food Vendors If a vendor is selling food, the City of Madison also re from the City Clerk's Office (see next page). Public He permit and their requirements for the safe handling of	ealth Madison & Dane County can provide	ermit w more i	hich is : Yomal	available on on this
*Please note that food cart vendors licensed by the C a Park Event Vending Permit.	ity to sell downtown or on other streets are	still re	guired l	o purchase
Event/Name of Group:				
PERMIT TYPE				
▼ Vending – Single Vendor	Single Day	\$275		
	Each additional day in a calendar year Single Day	\$50 \$75		
"Vending - Single Non-Profit	Each additional day in a calendar year	\$25	-	
Vending – Multiple Vendors (up to 7 vendors)	Single Day Each additional day in a calendar year	\$845 \$50		
VENDOR LIST				
How many vendors will be at the event? $\underline{0}$ You will be required to submit a complete list of vendormit Conditions.	fors and contact information for your event	as par	of your	Park Event
Will BeeriWine be sold at the event? If Yes, please continue, If No, skip this form.			Yes	No X
Alcohol (BeenWine) Sales Permit fee is \$700.00 for	one day and \$50,00 for each additional da	y in a c	alendar	year.
Additionally, a Temporary (Picnic Beer) License Have you applied for the Temporary Class "8" Retai	is required.		Yes	No 🗆
Application Date:				
Temporary (Picnic Beer) License The following are regulations from the City Clerk's Clark an application from the City Clerk's Office, 21	office. To obtain a Temporary Class "B" Rel O Martin Luther King, Jr. Blvd., Rm. 103.	ailers !	icense	you must