

# Park Event Application GENERAL INFORMATION



Are you applying for a NEW park event?  Are you applying for a returning park event with significant changes?	⊠Yes □Yes	□ No □ No
Name of Event: NADISON GOSPEL HEALTH FAIR & 5K		
Park Requested: Henn	Estimated Attend	lance: <u>55</u>
Type of Event (run/walk, fundraiser, festival, etc): Run Walk		
Name of Organization: Modison Gospel SK Foundation Is Organizer/Sponsor a 501(c)3 non-profit agency?	MYes	□No
MANDATORY: State Sales Tax Exempt	ion Number: ES#: 139.96	. )
Organization or Event Website:		<del></del>
EVENT SCHEDULE		
Date(s) of Event: 304 30, 3019 Event Start and End Times	:7:00 am- 12	3:00 nom
Rain Date (if any): Set-Up/Take-Down Start/E	nd <u>Times:là Oba</u>	w-1:00 pm
Does this require time in the park the day before your event?  If Yes, provide details of times and area requested:	☐ Yes	Ø No
PERMITS		
Will you have amplified sound at this event?  If yes, please fill out an Amplification Permit Application (page 13)	⊠ Yes	□No
Will have any temporary structures such as tents, stages, inflatables?  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	∐Yes	⊠No
Will you sell anything event?	☐ Yes	⊠No
If yes, please fill out a Vending Permit Application (page 15) Will you serve any food at this event?	☐Yes	⊠No
If yes, what will be served:	☐Yes	⊠No
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 PE PROPERTY CAUSED BY OR RESULTING FROM THE ACTIVITIES FOR WHICH THE PE	OSS, DAMAGE, OF ERSON OR ANY D	REXPENSE
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.		
Applicant Signature Well 3 mg. Date 2	2/14/2019	



# Park Event Application NARRATIVE & SCHEDULE

play MADISON PARKS

Please provide a brief narrative of the event.

The Madison Gospel HEALTH FAIR 45K will provide area residents an opportunity to meet local doctors, organizations, is other healtheare professionals is learn new ways to take control of their health is general wellbeing.

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

EXAMPLE	EXAMPLE
8:00 a.m.	Setup
(6:00 am	Setup
7:00 am	Registration/Check-In
8:00 am	DJAce begins set
8:15 am	Fair open to public
10:45 am	DJ Ace begins final set
12:00 PM	Fair closes   Breakdown begins
1:00 pm	Leave park
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# Park Event Application SITE MAP



Please attach a site map. Also attach a route plan (if applicable).

- Site map should include, but is not limited to, the following:
  - Accessible paths for wheelchairs
  - Disabled parking
  - Dumpsters
  - Exit location for fenced outdoor events
  - Event Perimeter
  - Fencing
  - · Garbage and recycling receptacles
- Placement of vehicles
- · Portable toilets
- Signage
- Stages
- Temporary Structures
- Vendors

If the event includes a run/walk component on City streets, the approval of the Parks Division for the use of the park does not imply approval of the proposed route. Routes need to be approved with a Parade Permit.

What impact do you anticipate your event will have on the residents/businesses in the areas surrounding the park? Consider things such as noise, parking, traffic, etc. What plans do you have to minimize these impacts?

We believe the event may have some marginal effects on surrounding homes, as setup begins. The noise effect will dissipate as the race begins, but should not negatively affect traffic or other general noise comfort levels.

Provide Detailed Event Site Map (feel free to provide this map as a separate attachment):

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Race	Signor	Oreck-I		Signat	First And
					Parking



# Park Event Application AMPLIFICATION PERMIT



Will there be amplification at the event?  If Yes, please continue. If No, skip this form.	Yes	□ No□
By Ordinance, public amplification is not allowed in City Parks except be considerate of park neighbors and other park users.	by permission from the Parks Di	vision. Please
Event/Name of Group: D.T.Ace		
Type of Amplified Sound:		
☐ Band ☑ DJ ☐ Sound System ☐ Spe ☐ Other (please specify):  SOUND DURATION INFORMATION	eches/Announcements	Karaoke
DATE TYPE TIME SO	OUND BEGINS TIME SO	OUND ENDS
7/20/2019 PJ 8:00		) am

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:
  - o Two 6 hour permits can be purchased on a day.
  - o No carryover of hours unused on one date may be applied to a second date.
  - o 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 amplification being ordered to cease immediately.



# Park Event Application CLEANUP AND RECYCLING



Will you be providing your own receptacles?  If yes, which receptacles and how many?  Recycling Bins:  Trash Bins:  Dumpsters:  If yes, name/contact information of collection agency providing equipment and service:	y	<b>₩</b> Yes	( <b>≥</b> Nb
Will you be renting additional Parks receptacles?  If Yes, please continue. If No, skip the remainder of	this form.	Yes	⊠No
Event/Name of Group: Park Name: Please indicate quantity of trash barrels:	8 barrel minimum: Each incr	ement of up to 8	barrels \$150
Please indicate quantity of dumpsters:	pel	r dumpster, and p	per tip: \$300

# **EMERGENCY ACTION PLAN (EAP)**

#### I. GENERAL

The "Madison Gospel 5K Run/Walk" will be held July 20, 2019 at Mt. Zion Baptist Church/ 2019 Fisher St./Church.

#### II. PURPOSE

- A. This emergency action plan predetermines actions to take before and during the "Madison Gospel 5K Run/Walk" (hereinafter 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: Uchenna (Uno) Jones.

### B. Emergency Notification

1.	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.
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2. We will / will not have on-site EMS (ENTER CONTACT NAME & CELL PHONE NUMBER)

3. We ⋈ will / will not have on-site Police or Security (Lieutenant David McCaw & C# 608-445-0039)

#### C. Severe Weather

- 1. Weather forecasts and current conditions can be monitored through the <u>National Weather</u> <u>Service's 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 Uchenna (Uno) Jones and will be responsible to monitor the weather conditions before and during the event.
- 3. During the event If severe weather occurs during the event, the EAP event representative or his/her designee Uchenna (Uno) Jones 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.
- 5. 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

- 1. 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
- b) Each space is allowed 1 LP tank per cooking device. All LP tanks are to be secured in an approved manner (tied, strapped, chained, etc.)
- c) 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 food service areas)
- 4. 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

- 1. 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.
- 2. Event manager shall contact the Fire Department to determine if there is a need for on-site Emergency Medical Services at this event.
- 3. 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

- 2. 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 callback number

#### G. Emergency Vehicle Access

- 1. Access for Emergency Vehicles will be maintained at all times.
- 2. 20' Fire Lanes are required to be kept open at events.
- 3. A 14' minimum height clearance requirement for anything that goes over a street or fire lane
- 4. Participants and spectators will be directed to park in approved areas and not to obstruct protective features, sidewalks or public throughways.
- Crowd control will be managed by: Uchenna Jones &Volunteers.
- 6. Parking for vendor and staff vehicles will be: Penn Park & Mt. Zion Baptist Parking Lot.
- 7. Parking for attendee vehicles will be: Available Neighborhood street parking on Taft St., Fisher Street, Beld,.

### V. CONTACT INFORMATION

Primary Contact	Uchenna Jones	608-239-9668
Secondary Contact	Daniel Sims	501-618-1796
Emergency	Dane County 911 Center	911
Non-Emergency	Madison Fire Department	(608) 266-4420
Non-Emergency	Madison Police Department	(608) 255-2345



# Park Event Application MARKETING



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?  If Yes, please continue. If No, skip this form.	Yes	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 advance	9
Official Name of Event: Madison Gospel HEALTHE FAIR + 5K		<u>*</u>
Park Location: Penn Park		
Public Contact Phone: 501.618.1796	A8869040000000000000000000000000000000000	
Website:		
Admission Cost: Free		
Date of Event: 7 20 2019		
Beginning/End Time of Event: 8.00 am - W.00 pm		
Two contains description of events		
Joinus during the MG5K Health Fair, with free screenings, exer games, ihr!	crise de	mos