



City of Racine Parks, Recreation & Cultural Services Public Event Application

**Play
Every Day.**

(For new events/returning with significant changes)

INSTRUCTIONS: Please carefully read the attached "Public Event Planning Instructions" before completing this application. Incomplete applications will not be accepted.

Applying for a NEW public event? ☒ Yes ☐ No

Applying for a RETURNING public event with significant changes? ☐ Yes ☒ No

STEP 1: SELECT A LOCATION(S)

please select all that apply:

☐ Crosswalk Park, 317 Main St.

☐ Harris Plaza, 605 Grand Ave.

☐ Island Park, 1704 Liberty St.

☐ Lake Michigan Pathway

☐ Lincoln Park, 2200 Domanik Dr.

☐ Lockwood Park, 4300 Graceland Blvd.

☐ Monument Square, 502 Main St.

☐ North Beach Park, 1501 Michigan Blvd.

☐ Pershing Park, 800 Pershing Dr.

☐ Root River Pathway

☒ Sam Johnson Parkway

☐ Stage-on-Wheels

☐ Other _____

STEP 2: EVENT ORGANIZER INFORMATION

Name of Event Organizer N/A

Name of the Organization Amber Huron

Address 2307 Taylor Ave City/State Racine Zip 53403

Daytime Phone _____ Cell Phone 262-417-0583 Email ahuron34@gmail.com

Alternate Contact Tremain Carter Phone 262-631-0276 Email tremaincarter@yahoo.com

Please select appropriate response

Event Organizer is an: ☐ Individual Proprietor ☐ Corporation* ☐ LLC* ☒ Other _____

Is the applicant organization a not-for-profit? ☒ Yes* ☐ No

(*Please attach a proof of your not-for-profit status or a copy of the business structure status to this application for verification purposes.)

STEP 3: EVENT INFORMATION

Event Name Huron-Carter Wedding Expected Attendance 75-100

Date(s) of Event August 20th, 2022 Start Time 1pm End Time 2pm

Set-up Date August 20th, 2022 Set-up Start Time 10am Set-up End Time 1230pm

Tear-down Date August 20th, 2022 Tear-down Start Time 2pm Tear-down End Time 3pm

Does your event require you to be in the park before 8 a.m. and after 10 p.m.? ☐ Yes ☒ No

STEP 4: RUN/WALK INFORMATION

Run/Walk Step-off time _____ Total # of Aid Stations _____

Does the route include any portion of the City bicycle pathways? ☐ Yes ☐ No

Run/Walk route map included? ☐ Yes ☐ No

How will the route be marked? (i.e. staff/volunteers at turns, signs staked in grass along the route, etc.)

STEP 5: STAGE-ON-WHEELS INFORMATION

Delivery Location _____ Location Street Address _____ Zip _____

Delivery Date _____ Delivery Time _____ Pick-up Date _____ Pick-up Time _____

Open/Close/Use Information: Date Stage to be OPENED _____ Opening Time _____ Closing Time _____

Additional Opening Date _____ Opening Time _____ Closing Time _____

Is additional staging needed? ☐ yes ☐ no Will amplified music be played? ☐ yes ☐ no Will electricity be needed? ☐ yes ☐ no

STEP 6: ADDITIONAL INFORMATION

- 1) Has this event been previously held in a City of Racine park? ☐ yes ☒ no
 Event Name _____ Location _____
 Date _____
- 2) Will you be selling, serving, and/or sampling beer and/or wine at your event? ☐ yes ☒ no
- 3) Will you be selling, serving, and/or sampling food/beverages at your event? ☐ yes ☒ no
- 4) Will you have amplified sound at this event? ☒ yes ☐ no
- 5) Will you have any temporary structures such as tents, stages, inflatables at this event?
 # of tents/canopies _____ Size of tents/canopies _____ floral archway _____ ☐ yes ☒ no
- 6) Will your event feature vendors? ☐ yes ☒ no
- 7) Will your event include the use of portable toilets? (# of portable toilets _____) ☐ yes ☒ no
- 8) Does your event include animals, exhibitions or petting zoos? ☐ yes ☒ no
- 9) Will you be posting advertisement for your event within the City of Racine Parks? ☐ yes ☒ no
- 10) Will your event require Monument Square Drive to be closed? ☐ yes ☒ no
- 11) Will your event require use of the electrical services? ☐ yes ☒ no

SECURITY DEPOSIT REFUND INFORMATION *To whom will the Deposit Refund be sent:*

Name of Payee/Organization Amber Huron ATTN Amber Huron
 Street Address 2307 Taylor Ave RM/FLR/STE/UNIT _____
 City Racine State WI Zip Code 53403

APPLICATION SIGNATURE

The event organizer/applicant hereby certifies that all of the information provided within and for this permit application is true and correct to the best of his/her knowledge. The applicant understands falsification of information may result in termination of use/permit and furthermore could result in denial of future use of park facilities. Applicant certifies he/she has read and understands the **Public Event Planning Instructions**.

The applicant agrees to have an authorized representative in attendance at the event at all times the event is in progress, who shall supervise the reserved premises to ensure that the event is conducted in a safe and orderly manner. Applicant agrees to pay City for PRCS permits sixty (60) days prior to the first park use date and within 30 days following the date of invoice the cost of overtime expenses incurred by City for its assistance in the implementation of this permit.

RELEASE OF LIABILITY

Applicant hereby covenants Not To Sue and agrees to Indemnify, Defend, and Hold Harmless City, its departments, officers, agents, employees, &/or volunteers from and against any and all costs (no limitation), damages, expenses, attorneys fees, or liability for personal injuries, bodily injuries, death, or property damage, of any character and to any person or property, regardless of cause, arising out of the acts of or sustained by Applicant, permit holder, event organizer, its officers, employees, agents, volunteer workers, participants in said Event or frequenters of said area during the time specified in the application and issued permit.

I have read this release and waiver of liability, fully understanding its terms, and understand that I have given up substantial rights by signing it. I realize I am not required to sign the Release. *Falsification of information on the application will result in forfeiture of up to \$200 per falsified item.*

Signature of Authorized Event Organizer: _____ Date 3/28/2022

***If you are a Limited Liability Company, all partners must provide a signature:

Signature of Partner: _____ Title: _____ Date: _____
 Signature of Partner: _____ Title: _____ Date: _____

OFFICE USE ONLY:

Does request require approval by the Board of PRCS or Common Council?

☒ Yes ☐ No Approval date: _____

☒ Event Schedule ☒ Letter of Request ☐ Layout Map/Route ☐ Certificate of Liability ☐ Not-For-Profit



NARRATIVE, SCHEDULE, ROUTE/SITE MAP, STAGE-ON-WHEELS

Please provide a brief narrative of the event. If your event is a new event, provide a detailed "Letter of Request" on a separate sheet of paper:

EVENT SCHEDULE

The schedule begins when event set-up starts and ends when clean-up of the event area is complete, all equipment is removed and the park is available for regular use.

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

- General: set-up, hours of operation, teardown/clean-up, leave park
- Vending: when vendors will set-up, hours of operation, teardown/clean-up, leave park
- Music/Performance: stage set-up, performance schedule, teardown/clean-up, leave park
- Displays, Exhibits, Demonstrations: set-up, open hours, teardown/clean-up, leave park
- Run/Walk/Parade, etc.: when staging starts, start time(s), end time(s), set-up, clean-up, leave park

Example: 8:00 a.m.	Example: Set-up
10am	Set-up time
1pm	Ceremony Start-Time
2pm	Ceremony End-time
2pm	Tear down
3pm	off location

Please attach a detailed event route/site map and/or Stage-on-Wheels placement map.

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 City of Racine Parks, Recreation, & Cultural Services department for the use of the park **does not imply approval of the proposed route**. Routes need to be approved through Department of Public Works and City of Racine Police Department.

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?

Our guest planning to attend our Wedding Ceremony will need parking and we plan on using the city parking lot and or Lake Ave garage.