P.O. Box 663 Racine, WI 53401

April 17, 2011

Ms. Stacey Salvo
Office of City Attorney
City of Racine – City Hall
730 Washington Avenue, Room 201
Racine, WI 53403

RE: Rotary Post Prom, May 21, 2011

Dear Ms. Salvo,

Please reference file ID - 08-1953 of Racine Common Council from 2008 whereby the City agreed to allow Downtown Rotary to host Post Prom on a yearly basis at the Racine Festival Hall.

The date for Post Prom is May 21, 2011. For Post Prom the Racine Downtown Rotary will:

- Close Fifth Street from Lake Avenue to Festival Park, Festival Park Drive from Fifth Street to Sixth Street, Sixth Street from Festival Park Drive to Pershing Park Drive, Pershing Park Drive from Sixth Street to Eleventh Street, and Eleventh Street from Pershing Park Drive to Main Street from 7:00p.m., Saturday May 21, 2011 to 4:30a.m., Sunday, May 22, 2011.
- 2. Use Lakefront Parking Lot #4 on May 21 at no cost to Racine Downtown Rotary.
- 3. Obtain a Noise Variance Permit from the Racine Health Department for Post Prom
- 4. Use three Search Lights at Festival Hall for Post Prom
- 5. Run Interactive games in Festival Hall during Post Prom including a Video DJ, Karokee, & Inflatables.
- 6. Provide the City of Racine with any required Certificate of Insurance and Special Event Fee.

Please forward the Agreement to my attention to the address listed below as I am the Chair of Rotary Post Prom(Cirque d'Onze) 2011. I can be reached at (262)634-7108 or Julie@gjmllp.com with any questions you may have.

Sincerely,

Julie Craig

Rotary Post Prom Chair

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MINDO/YYYY)

this certificate is issued as a matter of information only and confers no rights upon the certificate Holder, this CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	LOCKTON COMPANIES, LLC-K CHICAGO	NAME: Lockton Companies, LLC					
	525 W. Monroe, Suite 600	PHONE (A/C, No. Ext): 1-800-921-3172 [FAX (A/C, No): 1-312-68					
	CHICAGO IL 60661	ADDRESS: Rotary@lockton.com	·				
,	(312) 669-6900		NAIC #				
		INSURERA: ACE American Insurance Company					
INSURED	All Active US Rotary Clubs & Districts	MSUMERB: ACE Property & Casualty Insurance Co	20699				
	Attn: Risk Management Department 1560 Sherman Ave. Evanston, IL 60201-3698	INSURER C:					
		INSURER D:					
		NSURER E:					
	·	MSURER F:					

REVISION NUMBER: CERTIFICATE NUMBER: **COVERAGES**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF HISTIRANCE	St	UBR		POLICY EFF (NM/DD/YYYY)	POLICY EXP	LIMITS
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X Liquor Liability Included GENT AGGREGATE LIMIT APPLIES PER:	<u> </u>	N .	POLICY NUMBER PMIG23861355	(MARIDIATYYY) 7/1/2010	7/1/2011	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED \$ 500,000 MED EXP (Any dris parson) \$ XXXXXXX PERSONAL & ADV (NJURY \$ 2,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMPTOP AGG \$ 4,000,000
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В	X UMBRELLA LIAS X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$	1 1	N	M00534092	7/1/2010	7/1/2011	EACH OCCURRENCE \$ 5,000,000
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARINIERREXECUTIVE CFFICERAMEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	AVA		NOT APPLICABLE			WC STATU- OTH- TORY LIMITS ER EL EACH ACCIDENT \$ XXXXXXX EL DISEASE - EA EMPLOYEE \$ XXXXXXX EL DISEASE - POLICY LIMIT \$ XXXXXXX

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 191, Additional Remarks Schedule, if more space in required)

The Certificate Holder is included as Additional Insured where required by written contract or permit subject to the terms and conditions of the General Liability policy, but only to the extent bodily injury or property damage is caused in whole or in part by the acts or omissions of the insured.

CERTIFICATE	HOLDER	t

The city of Racine, WI, it's mayor and city council, Racine Civic Centre and its Commission, VenuWorks, LLC., VenuWorks FAcility Management, Inc.; their parents, subsidieries, affiliate, directors, officers, employees, insurers and agents.

Additional Insured: City of Racine, Wisconsin for Rotary Post Prom, May 21 - 22, 2011.

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE