



CITY OF SPEARFISH

SPECIAL EVENT APPLICATION

Revised January 2015

Complete this application if you are requesting to use a city park, street, right-of-way or public area, or hold a parade, demonstration, assembly, or procession (race). An application must be processed for each special event and written approval must be received from the City of Spearfish before a public announcement of the event can be made. Submitting this application does not guarantee that your event will be approved.

INFORMATION ABOUT YOUR EVENT:

Name of Event

Name and Address of Organization/Individual Requesting Event Permit

Event Location (be specific)

Event Date(s)

Time(s)

Actual Time Parade/Run/Event Starts

Set Up Date(s) & Time(s)

Tear Down Date(s) & Time(s)

Expected Daily Attendance at Event? _____ New Event? _____ Annual Event, Number of years? _____

Will Minors (18 and under) be Present? _____ Name of Person Responsible for Minors _____

Will Animals be Included? _____ Will Food be Served (if so, describe)? _____

Detailed Description of Event Purpose, Location and Route (*please attach Route/Site plan or additional sheet if needed*)

INFORMATION ABOUT YOU AND YOUR ORGANIZATION:

Event Liaison

Position with Organization

Address

Phone(s) – prior to event

Phone(s) – day of event

Contact E-Mail

**A \$1,000,000 single occurrence and \$2,000,000 aggregate liability insurance policy will be required for all events.
A certificate of Liability showing the City of Spearfish as beneficiary must be provided.**

PLEASE CHECK ALL THAT WILL APPLY TO YOUR EVENT:

Private Event

Public Event

Park Requested _____

Band Shell Shelter **(Band Shell/Shelter Permit required from Public Works 605.642.1333)**

Parade (route required) Demonstration/Assembly (site plan required) Procession /Race (route required)

Temporary Street Closure (emergency vehicle access must be maintained)

Street, Block or other Public Area Requested

Admission Charged, \$ _____ Who will receive proceeds: _____

Alcohol Served **(Alcohol Permits required from Finance Office 605.642.1325)**

Other (specify) _____

PLEASE CHECK THOSE SERVICES YOU ARE REQUESTING FOR THE EVENT:

If available, the City may assist with the following services. **A deposit or fee may be required for these services.**

City Staff, Police or Emergency Personnel _____

Traffic Cones (amount requested) _____ Trash Containers (amount requested) _____

Water (from hydrant) _____ Picnic Tables (amount requested) _____

Electric (if available source onsite) _____ Other (specify) _____

REMINDER: No paint on Rec Path please.

Applications must be received at least four (4) weeks prior to event.

Final payment (if applicable) and insurance must be received two (2) weeks prior to event.

For and in consideration of the use of the above named location for the purpose identified, I agree to indemnify and hold the City of Spearfish, South Dakota, harmless from any and all claims, demands or liability for personal injury or property damage arising out of the aforesaid use of designated public premises.

Signature

Date

Organization

COMPLETE APPLICATION AND SUBMIT TO:

Chris Harwood, City of Spearfish Community Activities Coordinator

Mailing Address: 625 N. 5th St (City Hall) Physical Address: 122 Recreation Ln (Rec Center) Spearfish, SD 57783

Office: 605.722.1430 Fax: 605.722.1436 Cell: 605.645.9568 E-mail: chris.harwood@cityofspearfish.com

For Office Use Only:

Application Received (date and time) _____

Approved _____ Denied _____ Certificate of Insurance Received _____

Parks _____ Streets _____ Police _____

Fire _____ Finance _____ City Administrator _____

Approved Permit Routed to: Parks Streets Police/Dispatch Fire Public Works Finance