



2020 TRAIL USE SPECIAL EVENT PERMIT

Date of Application: \_\_\_\_\_
Date of Proposed Event: \_\_\_\_\_
Description of Event: \_\_\_\_\_

APPLICATIONS MUST BE COMPLETE AND INCLUDE THE FOLLOWING

- Application for Trail Use Special Event Permit
Event Site Plan
Application Fee \$25/non-refundable
Event Agenda/List of Activities

Note:

- Park and trail operating hours are 5am to 11pm.
Permit applications must be submitted to the Department at least six weeks prior to event
An application for Special Use shall not become a permit until it has been approved and signed by the Department.
An application for Special Use shall not become a permit until it has been approved and signed by the Department. Application approval will not be finalized without submittal of an application, certificate of insurance and payment of all fees/charges/deposits.

Applicant Information

Contact Name: \_\_\_\_\_
Contact Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_
Title/Position: \_\_\_\_\_
Organization: \_\_\_\_\_
Address: \_\_\_\_\_
City, State, Zip: \_\_\_\_\_
Contact Email Address: \_\_\_\_\_
Organization Email and URL: \_\_\_\_\_
Organization Phone Number: \_\_\_\_\_

Event Information

Name of Event: \_\_\_\_\_
Type of Organization:
Governmental Non-Profit Tax ID# Private User
Type of Event:
Concert Cultural Reunion Entertainment
Fundraiser Parade Sports Walk/Run
Festival Public Info Other \_\_\_\_\_



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**NOTE:** All Events: A map detailing placement of event (site map) will be required for all events. GIS maps are available on line at <http://bloomington.in.gov/maps/>. A copy of your proposed route must be attached to this application. If you are requesting that any public street be partially closed/blocked off, contact the City of Bloomington Economic and Sustainable Development Department 812-349-3700.

1. Is this event open to the public?     Yes     No
2. Event Description: Please explain and attach a detailed copy of your route map and planned activities.) \_\_\_\_\_
3. Requested route along the trail: \_\_\_\_\_
  - a. If event is on park grounds or more than one facility is being used, please provide map showing parking, activity venues, first aid, etc.
4. Requested date(s) and time(s) for event:

Event Activity	Setup Date/Time	Event Starting Date/Time	Event Ending Date/Time	Dismantle Complete Date/Time

5. Is there a designated date for inclement weather? (rain date)  Yes  No  
If yes, date \_\_\_\_\_
6. Total number of anticipated participants (i.e. volunteers, spectators, participants, etc.):  
Total: \_\_\_\_\_ Peak Attendance: \_\_\_\_\_ at time: \_\_\_\_\_
7. Is this a first time event for you or the sponsoring organization at this location?  Yes  No  
(a) If not how does this event differ from (a) similar event(s) in previous years(s)?  
\_\_\_\_\_  
(b) Attendance totals for previous event: Daily \_\_\_\_\_ Overall \_\_\_\_\_
8. How do you plan to publicize this proposed event? \_\_\_\_\_  
If available, please attach a copy of the proposed publicity plan or flyer. Please list event website if available.

**NOTE: DO NOT PRINT FOR PUBLICATION UNTIL YOUR EVENT IS APPROVED BY CITY OF BLOOMINGTON PARKS AND RECREATION.**

9. Will any signs, banners or flyers be hung or posted?     Yes  No  
If yes, describe the proposed locations of the banners, etc. \_\_\_\_\_

**NOTE:** Due to city ordinances regarding signage, additional permission may be required to hang banners/signs in advance of the event. Contact the City of Bloomington Planning Department at 812-349-3423.



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10. Do you plan to erect temporary structures such as tents, booths, tables, etc. for this event?

Yes     No

a. If yes, describe the proposed locations of the banners, etc.

Item	Size	Quantity

**NOTE:** Tents may not be staked without prior approval. All components of vendor display, including tents, umbrellas and signs, must be properly secured on all sides.

b. If contracting with a company that will be providing any of the above, list information below:

Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
 Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
 Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

11. Please list accommodations you are providing for persons with special needs: (parking, transportation, accessibility) \_\_\_\_\_

12. Will donations/contributions be accepted during this event?     Yes     No

a. If yes, please explain how these donations will be generated or collected.  
 \_\_\_\_\_

13. Will there be an admission charge to attend/participate?     Yes     No

a. If yes, Type Fee(s): \_\_\_\_\_ Fee Amount: \_\_\_\_\_

14. Do you plan to sell, distribute or give away refreshments and/or merchandise

(i.e. food, beverage, T-shirts, CD's, Art, etc.)?     Yes     No

a. If yes, List Type and Number of Booths:

Type	Quantity

**NOTE:** Bloomington Parks and Recreation will charge a \$25.00- \$35.00 vending fee for each vendor/booth selling food/merchandise and/or any admissions charges or monies collected while on park property.

**NOTE:** A temporary Food permit must be obtained from the Monroe County Health Department if you are planning to sell food (i.e. hot dogs, nachos, candy, etc.). Any non-profit organization must show proof of non-profit status when applying for permit. For more



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information, contact the Monroe County Health Department at 812-349-2543. A toilet and hand washing station must be provided (portable or in facility) for anyone preparing/selling food.

15. Do you plan to sell or distribute alcohol?  Yes  No

a. If yes, explain: \_\_\_\_\_

NOTE: Alcohol sales in City-owned parks, trails, and spaces require the approval of the Board or Parks Commissioners and the Director of Parks and Recreation. Please see the "2020 Guidelines for Requesting/Approval of Alcohol Sales with an Approved Event Permit.

16. Will there be displays, literature, or other types of solicitation?  Yes  No

17. Are you providing additional portable toilets for your event?  Yes  No

a. If yes, how many? \_\_\_\_\_ Location (show on map): \_\_\_\_\_

NOTE: The City of Bloomington Parks and Recreation Department requires you to have 1 (one) rest room facility for every 500 participants. If number needed exceeds what park has available, it will be the organization's/event organizer/s responsibility to acquire the necessary number. Proof of payment will be required with application.

18. Please describe how you plan to remove trash from the event site:

Person Responsible: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Relationship to Organization: \_\_\_\_\_

NOTE: Each organization will be responsible for cleaning the site and bagging all trash. Bagged trash (10 bag maximum) that is placed by a park trash receptacle will be removed by the BPRD at no extra cost. Failure to clean the site and bag the trash may result in the reduction or loss of your security deposit. If an event is deemed large enough to produce more than the 10 bag maximum it will be the event organizers'/applicant's responsibility to obtain additional trash receptacles and/or dumpsters for removal of trash. Overfill of park trash receptacles will also result in the loss of deposit.

Security/Safety:

19. What are you plans for severe weather?

\_\_\_\_\_

20. Do you have a scheduled rain date or location?  Yes  No

a. If yes, please list: \_\_\_\_\_

21. Who will be the on-site person responsible for making weather/emergency decisions?

In the event of an emergency at your event, please notify Bloomington Parks and Recreation 812-349-3742 or marlerh@bloomington.in.gov within 24 hours of the emergency.



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Contact Person: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

22. What are your plans for providing security, traffic and/or crowd control:

\_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

23. What are your parking plans? Overflow Parking?

\_\_\_\_\_

24. What are your plans for providing emergency/medical services?

\_\_\_\_\_

**Event Entertainment:**

25. Do you plan on providing musical entertainment for this event?  Yes  No

a. If yes, describe: \_\_\_\_\_

26. Will any type of sound amplifying equipment or devices be used in conjunction with this event?  Yes  No

a. If yes, describe:

Type	Quantity

b. If musical entertainment is used, please list contact information for sound technicians:

Contact Person: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

**NOTE:** The sponsoring organization’s Event Coordinator must comply with all City of Bloomington’s Ordinances regarding acceptable noise levels. (Please refer to the City’s Noise Ordinance, Title 14, Chapter 14.09 of the City of Bloomington Municipal Code.) It is the event organizer’s/applicant’s responsibility to be in compliance with all federal and state copyright laws.

27. Do you plan to provide other entertainment for this event?  Yes  No

a. If yes, attach planned program: \_\_\_\_\_

28. Events with animals require additional considerations and Animal Control approval. Are you planning to pursue permission for animals at your event?  Yes  No

29. Are you providing a generator as a power source?  Yes  No

30. Electrical Needs: \_\_\_\_\_

31. Are there any special provisions pertaining to your event that have not been addressed on this application?  Yes  No

a. If yes, please list: \_\_\_\_\_



## 2020 TRAIL USE SPECIAL EVENT PERMIT

**By signing and submitting this application, the permit applicant agrees to abide by the rules and regulations of the Department of Parks and Recreation including, but not limited to, the conditions as stated on this application and the City of Bloomington Parks and Recreation Department Rental Agreement.**

**Please Read Carefully :**

I, a duly authorized representative of the applicant, hereby affirm that the submitted information is true and correct to the best of my knowledge. As such, I have been authorized by the applicant to apply for this permit and have read, understand and agree to comply with all rules concerning the use of a Bloomington Parks and Recreation park. The applicant agrees that while renting the park, the applicant will not exclude anyone from participation in, deny anyone benefits of, or otherwise subject anyone to discrimination because of that person's race, color, sex, religion, creed, sexual orientation, national origin or ancestry, age or handicap. Under this Special Event Permit, the applicant assumes all responsibility for proper conduct in the park as outlined above, including assuring there is no consumption of alcoholic beverages.

I \_\_\_\_\_, on behalf of the permit applicant, shall agree to release, hold harmless, and forever indemnify the City of Bloomington, its employees, officers, and agents from any and all claims or causes of action that may arise from the activities described herein. This includes claims for personal injury, property damage, and/or any other types of claim which may arise from these activities, whether such claims may be brought by the permit applicant or any of its agents, or by any third party.

I have read this release and understand all of its terms. I agree with its terms and sign it voluntarily.

---

Signature

Date

**Due with Application**

Application Fee: \$25/non-refundable

\$ \_\_\_\_\_



## 2020 TRAIL USE SPECIAL EVENT PERMIT

**To be completed by Bloomington Parks and Recreation Staff.  
Renters will receive an invoice for the total amount due.**

**Fees, Charges and Deposits Schedule:**

- Permit Fee: \$150/day \$ \_\_\_\_\_
  
- Deposit: \$75/day/refundable \$ \_\_\_\_\_
  
- Vending: \$25-\$35/day per vendor selling food/merchandise/  
fundraising \$ \_\_\_\_\_
  
- Set-up Fee: 50% of base event day rent per day \$ \_\_\_\_\_  
This fee will be charged for any set up that is done prior to the day of  
the event.
  
- Tear-down Fee: 50% of base event day rent per day \$ \_\_\_\_\_  
This fee will be charged for any equipment, rental or personal, left on  
park property. (Incl. Sundays)
  
- Other staffing charges: \$20-\$30/hour \$ \_\_\_\_\_
  
- Vending: \$25-\$35/day per vendor selling \$ \_\_\_\_\_  
food/merchandise/fundraising
  
- Misc. (additional charges as deemed necessary due to the size and \$ \_\_\_\_\_  
scope of event and impact on park/facility)

**PARK USE ONLY**

**Date Received:** \_\_\_\_\_ **Fees Charged:** \_\_\_\_\_  
**Partnership:** \_\_\_\_\_ **Parks Event:** \_\_\_\_\_ **Permit #:** \_\_\_\_\_

**Scheduled for Special Use Meeting Date:** \_\_\_\_\_ **Approved:** \_\_\_\_\_  
**City of Bloomington contact person:** \_\_\_\_\_  
**Telephone Number:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_