



SPECIAL EVENTS APPLICATION FORM

Name of Event: _____

Date of Event: _____ Total Hours (including set-up & clean-up) _____

Event Start Time: _____ Event End Time: _____

Requested Location of Event: _____

Type of Event: ☐ Ceremony ☐ Festival ☐ Fundraiser ☐ 5k/10k Run
 ☐ Concert ☐ Celebration ☐ Other _____

What is the anticipated attendance?: _____

Description of Event: _____

Will there be food/beverages/merchandise sold at the event?: ☐ Yes ☐ No

If Yes, describe: _____
(Provide a copy of Health Department approval and liquor license, if applicable)

Will there be amplification of music or speakers?: ☐ Yes ☐ No

Will there be an admission fee? ☐ Yes ☐ No If Yes, please include admission fee details:

Organization Name: _____

Address: _____ Phone: _____

Responsible Party: _____ Phone: _____

Email Address: _____

Are City Services being requested?: ☐ Yes ☐ No (Fees may be charged for City services)

☐ Police ☐ Fire ☐ First Responder Standby ☐ DPW/Traffic; barricades, trash etc.

If yes, describe in detail what services: _____

IDEMNIFICATION AGREEMENT

I understand that the filing of this application does not ensure approval of a Community Event. I also understand that all Community Events organizers and participants must comply with applicable City ordinances, traffic rules, state health laws, fire codes and liquor licensing regulations. I further understand that an incomplete application may be cause for the denial of this event.

The Host Organization and/or the Event Organizer(s) agree to defend, indemnify and hold harmless the City of Ithaca and the City's employees, officers, City council members and volunteers harmless from any and all losses, damages, claims for damage, liability, lawsuits, judgment expenses and costs arising from any injury or death to any person or damage to any property including all reasonable costs for investigation and defense thereof (including but not limited to attorney fees, cost and expert fees) arising out of or attributed to the issuance⁴ of the applicant's Community Event Permit regardless of where the injury, death or damage may occur, unless such injury, death or damage is caused by the sole negligence or willful misconduct of the City.

The Host Organization and/or Event Organizers(s) agree to provide satisfactory evidence of, and shall thereafter maintain during the specified Community Event, such insurance policies and coverages in the type, limits, forms and rating required by the City, naming the City as an additional insured and copy provided upon event approval.

Print Name (Authorized Organization Official)

Title

Signature

Date

City Use Only

Date Submitted: _____

Department Head Review/Approval:

CITY MANAGER: ☐Yes ☐No

Conditions/Comments: _____

Signature: _____ Date: _____

DPW: ☐Yes ☐No

Conditions/Comments: _____

Signature: _____ Date: _____

FIRE DEPARTMENT: ☐Yes ☐No

Conditions/Comments: _____

Signature: _____ Date: _____

Approved by Council: ☐Yes ☐No ☐Not Applicable Date: _____

Date Copy Returned to Responsible Party: _____ ☐Mail ☐Email ☐In Person