



## 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 issuance<sup>4</sup> 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.**

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Print Name (Authorized Organization Official)

Title

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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: \_\_\_\_\_

**POLICE:**    Yes    No

Conditions/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Council:    Yes    No    Not Applicable    Date: \_\_\_\_\_

Date Copy Returned to Responsible Party: \_\_\_\_\_    Mail    Email    In Person