

# **SPECIAL EVENT APPLICATION**

Village of Caledonia - Clerk's Office 5043 Chester Lane, Racine, WI 53402 Email: jhoeffert@caledonia-wi.gov Phone: (262) 835-6414 FAX: (262) 835-2388

## **EVENT ORGANIZER INFORMATION**

Organization/Group Name:				
Address:	City:	Zip:		
Applicant's Name:	Phone #:	D.O.B:		
Applicant's Address:	City:	Zip:		
Email Address:				
Vendor Name(s):		Zip		
Vendor Address/Place of Business:		Phone #.:		
	*Submit a List for Multiple Vendors*			
EVENT INFORMATION:   New Specific	cial Event □ Recurring S	pecial Event		
Event Type: (Check all that apply)   Festi	val/Carnival/Amusement 🗌	Parade/Run/Walk/Bike Ride		
☐ Concert/March/Public Assembly Other	-			
Event/Activity Name:				
Purpose:				
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Location of Event and Attach Site Map:				
Event Date(s):				
Set-up Date/Time:		ean-up Time:		
Assembly Area:				
Proposed Parking and Access including dis				
Proposed Security (Attach Plan):				
Proposed Temporary Construction if neces	ssary (Attach Plan):			
Proposed Utility and Sanitary Uses if neces	ssary (Attach Plan):			
Proposed Vending Sites for Alcohol Consu	mption if necessary (Attach	Plan):		
Estimated Attendance:	_or Number of Parade Unit	s:		
Check Yes or No for each item:				
Yes No	Yes No			
Certificate of Insurance		ation Plan <u>(requires Fire/Police approval)</u>		
Hold Harmless Agreement		ires special permit)		
Beer/Wine Sales (requires special permit and licent Portable Toilets (not provided by Village)		es Fire approval and protection)		
Tents (requires special permit)	<del>-</del> -	ement Rides <u>(requires state registration)</u> quipment/Musical Bands <u>(requires special permit</u>		
Street Closure (Requires permit; Quantity of barricade		· ·		
Electricity Needed	Surety Bond			
Security/Police Escort/Add'l Police Svcs (requ				
☐ ☐ Concessions/Mobile/Food Prepared or Serve	of Inlease see Racine County Health for th	e nroner nermits)		

The person/group named on this application will be responsible for the conduct of the special event and for facility condition. We will not deny anyone the benefits of, or otherwise subject anyone to discrimination because of race, color, creed, national origin, handicap or religion.

The applicant for her/himself and for other persons, organizations, firms and corporations, if any listed in this application, being of sound mind and body, do hereby freely, voluntarily and knowingly, now and for all times, fully save and hold harmless the VILLAGE OF CALEDONIA, a Wisconsin Municipal corporation located in Racine County, and each and every of its elected and appointed officials, employees, representatives, agents, heirs, and assigns, jointly and severally from and against any and all claims, causes of action, actions, liabilities, demands, losses, damages, and/ or expenses of whatsoever kind and nature including counsel and attorney fees, which I have or may, at any time incur or sustain arising from, resulting from, incurred in consequence of, or pertaining to, any and all intentional and negligent acts, omissions, incidents, activities and transactions, of whatever kind and nature, direct or indirect, of mine own and those of or by the VILLAGE OF CALEDONIA, and each and every of its elected and appointed officials, employees, and agents, regardless of when or where, occurring or arising from this event.

The undersigned acknowledges receipt of the Special Events Guidelines. It is the applicant's responsibility to read and determine the sections that apply to their event and comply with Chapter 12 Of Title 7 Licensing And Regulation Of Festivals, Amusement Parks, And Carnivals Of The Code Of Ordinances Of The Village Of Caledonia,

Racine County, Wisconsin

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Date	Applicant's signature	

#### SPECIAL EVENT FEES

### **SPECIAL EVENT APPLICATION FEES:**

□ Larger Event (over 750 in attendance)	\$100* (non-refundable application fee
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#### **ADDITIONAL FEES/COSTS:**

Events requiring police services exceeding the availability of on-duty personnel may be billed the actual costs incurred.

Events requiring fire services exceeding the availability of on-duty personnel may be billed the actual costs incurred.

FOR OFFICE USE ON	<u>ILY:</u>		
Date Received:	Recommended Department Due Date:		
Application Fee:	Total amount pa	aid:	
Date Inspected By Police	e Department	Pass/Fail	
Date Inspected By Fire I	Department	Pass/Fail	
Date Inspected By Building Inspector and/or Public Services Director			Pass/Fail
Proof of Required State	Inspections? Yes/No		

<sup>\*</sup>Application fee will double if applications are not submitted within the required review time established in the Special Event Application. The Village reserves the right to deny a Special Event application if the application is submitted less than forty-five (45) days prior the event..