Amenian Legion Postage Event Date(s): Momonial Day Ceremony Max Griffin Park. Park Rental Fee: Added to Rec Calendar: Damage Deposit:_ Added to Legistar: Total Amount Due: Legistar File ID #:__ Total Amount Paid: Agenda Date: Payment Date: Balance Due: Event: Approved Disapproved Receipt #:____

:(1)	t Details
Event Title: MEMORIA Day	Ceremony
Purpose:	
☐ Athletic/Recreation	Outdoor Market
Parade*	Concert/Performance
Festival/Fair	☐ Social
	Road Closure* tted directly to Foley PD. Please See Appendix A
Provide a clear statement of the specific re	eason(s) you believe the event will
significantly contribute to and benefit the	
	+ - +
Memorial for all fall	len Veterans
0	
	A A
Provide a clear statement of the opportun	ity for City-wide citizen participation in the
event.	
4-4	
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Are there any potential negative impacts t	o the local business community or
Are there any potential negative impacts t surrounding areas?	o the local business community or
, , , , –	to the local business community or
, , , , –	o the local business community or

The City reserves the right to request an Event Application Presentation to staff if they deem the event to have an impact on the surrounding community.

Event Details Continued

Setup Date & Time:	
Event Start Date: 5/24/2023	Event Start Time: 9:30 Am
Event End Date: 5/24/2025	Event End Time: 12:00
Clean-up Date & Time: $5/2\psi/25$	<u> </u>
Outdoor entertainment may take place from a and 8 am – 11 pm on Friday and Saturday.	8 am – 10 pm, Sunday – Thursday
Main Contact Name: Van Hub	bard Doub
Phone Number: <u>251-979-0338</u> B	ackup Phone Number: <u>251 716 0124</u> wadd
Email Address: Vanhubbard 670	omail.com
Where will the event take place?	<i>O</i>
	☑Park Property
Estimated Attendance: Unknown	poen to public
Estimated Attendance Previous Year:	
Estimated Attendance During Peak:	
Event Website/Facebook Page:	
Event Promoter (if other):	
Is this a repeat event for the City?	5
Will the event include any of the following?	
Fireworks	☐ Mobile Food Vendors
Generators	Street Closure
Live Entertainment	☐ Parade
Tents	Tents over 400 sq. ft.
Alcohol	Other
Petting Zoo, Carnival, Circus, In	flatables (if yes additional insurance will be required)
Open Flames of Any Type	

Required Documents (continued)

Waste Management Plan Consideration must be given at all times to how waste generated by event will be managed by Event Organizer. Depending on the details of your event, you may be required to develop a Waste Management Plan. Please note, if waste is left at City venues following an event the cost of removal and clean-up will be passed on to the Event Organizer. Noise Control Plan Please describe the sound equipment/that you will use_ the Commander No Will you be using amplification? What noise sources are anticipated from the event? Pre-recorded Live music/band Acoustics PA System Other Please provide a list or performers, performance type, music genre, performance times and duration. The complete performance list is required 7 days prior to the event. Road Closures Parades and Road Closures must be approved by City of Foley PD. All events must give substantial notice (60 days) to minimize the risk to your event. Additional Service Providers Provide a complete list all event service providers 7 days prior to event including EMS, Carnival Operators, Portable Toilets, Tables/Tents, Barricades/Traffic, etc. This must also include all food vendors so Foley FD can check for adherence to fire code. Marketing Materials Any signage must comply with the City's Temporary Advertising Signs Policy. Signage must be robust and of good quality. Additional signage may require a permit, Do you wish to erect signage or banners within the City to promote your event

Type of signage or banners:

Self-Certification Form

I/We,
I/We accept full responsibility for any damages incurred to City of Foley premises including irrigation lines, electrical lines, water mains, electricity, toilets, pavilion, and other permanent structures as a result of our activities during the specified contract period.
I/We indemnify the City of Foley against any action, suit or proceeding caused by my failure to observe all statutory and or other requirements or as a result of my negligence or willful actions.
I/We will ensure the appropriate liability and other insurances are in place for the activities to be conducted.
I/We understand that I am responsible for obtaining approval from all applicable agencies.
I/We will keep a copy of the completed form on-site during the event to present upon request to any police officer prior to or during the event.
I/We will provide a post event letter to the Mayor and Council to identify the contributions made to the local community. Signature: Date: 4/03/25 Print Name: Pauline Weekler