Event Date(s): FOLY Witches Pede 10 25/25

Added to Rec Calend	ar: <u>6/9/25</u>
Added to Legistar:	6/9/25
Legistar File ID #:	<u>15-0300 </u>
Agenda Date:	6/2025
Event: Approve	d Disapproved

Park Rental Fee:
Damage Deposit:
Total Amount Due:
Total Amount Paid:
Payment Date:
Balance Due:
Receipt #

Event Details Event Title: Folly Witches Ride Purpose: Athletic/Recreation Outdoor Market Parade* Concert/Performance Festival/Fair Social Demonstration* 🔀 Road Closure* *Additional paperwork is required to be submitted directly to Foley PD. Please See Appendix A Provide a clear statement of the specific reason(s) you believe the event will significantly contribute to and benefit the City of Foley. as back into our communit funda raised Hine non-000 amily stomise, Turkey Provide a clear statement of the opportunity for City-wide citizen participation in the event. can occur on three levels Are there any potential negative impacts to the local business community or surrounding areas?

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: $10/25/25 - 9am$
Event Start Date: 10/25/25 Event Start Time: 5pm
Event End Date: 10/25/25 Event End Time: 10pm
Clean-up Date & Time: 16/25/25 - 10pm
Outdoor entertainment may take place from 8 am – 10 pm, Sunday – Thursday
and 8 am – 11 pm on Friday and Saturday.
Main Contact Name: Sava Harkins & Brenda Shambo
Phone Number: <u>251-233-1930</u> Backup Phone Number: <u>251-213-736</u> 7
Email Address: Sharkins@city of foley.org
Where will the event take place?
Public Property Park Property
Estimated Attendance: 700
Estimated Attendance Previous Year: 500
Estimated Attendance During Peak: 700
Event Website/Facebook Page: Facebook - Folcy Witches Ride
Event Promoter (if other):
Is this a repeat event for the City? <u>UES</u> , <u>YEARY</u>
Will the event include any of the following?
☐Fireworks ☐ Mobile Food Vendors
☐ Generators
Live Entertainment Parade
☐ Tents ☐ Tents over 400 sq. ft.
Alcohol By Ob
Petting Zoo, Carnival, Circus, Inflatables (if yes additional insurance will be required)
Open Flames of Any Type

Required Documents

Site Plan

- Provide a detailed plan on the location of the following:
 - o Music, barricades, food truck and vendor layout
 - o Number of toilets (how often are toilets serviced) and hand-washing sinks
 - o Entries and exits, including emergency access if deemed necessary

Utilities Plan

- Utilities including electrical requirements/generators and water supply.
- Obtaining complete electrical and water needs information from vendors, musicians, tent lighting, entertainers, exhibitors, is the responsibility of the event organizer.
- Event organizers will need to decide if the existing power facilities are suitable.
- The installation and distribution of all electrical power used to support the event shall be completed by a licensed electrician. In some cases, electrical distribution plans and load calculations prepared by a licensed electrician may be required.

Security/Safety Plan

- Plan will be developed and approved in coordination with Foley PD/FD
- Please describe your security plan including crowd control, internal security, and venue safety.
- Foley PD officers are required when alcohol will be served at City facilities.

Emergency Action Plan

- Please describe your basic emergency response plan including:
 - o Identification of who will make key decisions such as canceling the event
 - Plans for communicating with event staff, volunteers, guests, vendor, on-site police/security, and first aid providers
 - o Plan for safely managing site evacuation
 - o Plan for injured participants or lost children
 - o Plan for securing potentially dangerous items on the event site (tents, signage, propane tanks, and items that can be propelled by high winds)
 - Plans for inclement weather

Medical Plan

- This will require a plan to be approved by Foley Fire Department.
- The event organizer shall be responsible for making adequate plans for medical coverage of performers, employees, participants, and attendees. Please describe your medical plan including your communications plan and the types of resources that will be at your event.
- Please identify any medical aid areas.

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.

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Noise Control Plan
· Please describe the sound equipment that you will use <u>Live Band or DT</u> <u>instruments</u> and or Dt equipment - speakers & amps.
 Will you be using amplification? What noise sources are anticipated from the event?
Pre-recorded Live music/band Acoustics
PA System Other_DJ
 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
Yes No
o Type of signage or banners: The only signs we use are along the approved rate - placed tremoved saned

Required Documents Continued

Certificates of Insurance

Any amusements rides or inflatables required additional insurance with the City listed as an additional insured. In addition to completing the application form and paying permit and rental fees (when applicable), the applicant is required to submit an original certificate of insurance showing Commercial General Liability coverage with a minimum of \$1,000,000 combined single limit per occurrence. If any alcohol will be served, liquor liability coverage must be obtained and is subject to Alabama's statutory limits. If the applicant has employees, workers' compensation insurance must be obtained and is subject to Alabama's statutory limits. The applicant also agrees to endorse the City of Foley (City of Foley, Alabama, Attn: Special Events Division, P.O. Box 1750, Foley, AL 36535) as an additional insured on the general liability, auto, and liquor liability policy and to include a copy of each endorsement with the certificate of insurance. Proof of insurance, acceptable to the City, shall be furnished no later than five (5) days preceding the date of the assembly. Failure to provide proof of insurance will automatically revoke permit. Each certificate of insurance shall provide that the insurer must give the City of Foley at least twenty-one (21) days' prior written notice of cancellation and termination of the applicant's coverage there under.

Events run for profit and commercial purposes will be subject to an application fee. Please contact the City of Foley for current fees and charges. Processing Fee TBD due 21 days prior. Applications will not be accepted less than 21 days before an Event Date. All vendors participating in events must have a business license or special event license.

Fire Department Representative:
Police Department Representative:
Public Works Department Representative:
Leisure Services Department Representative:

	Department		Estimated Cost	
Fire Department				
Police Department				
Public Works				
Leisure Services				
	TOTAL	,		

City	Council Approval Date:		
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Self-Certification Form

I/We, Society of Black Hats , as the event organizer seeking
approval to host an event within the City of Foley, acknowledge that the information submitted in this
application is true and correct.
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: Auco Warbis Date: 5/23/25
Print Name: Odra Harkins

Additional Application for Parade/Demonstration/Road Closure

Foley Police Department TO: 200 East Section St Foley, AL 36535

Instructions: This application shall be filed not less than ten (10) days before the date on which it is proposed to conduct the parade/ demonstration/road closure.

What are you applying for	What	are you	apply	ying	for?
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hat are you applying for:
Parade Demonstration Road Closure
Name of Sponsoring Organization: Society Of Block Hots.
Applicant: Sara Harkins & Brenda Shambo
Event Manager/Person in Charge: <u>Kylle Rauler Sov</u> (If there is a different person in charge of activities at different locations, each person must be listed.)
Address: PO Box 402 Foley, AL 36536
Day Phone: Evening Phone:
Cell Phone: 251-228-1328 Fax:
Email: Foley witchesvide @ gmail. com
Purpose of Application for Permit: Foley Witches Ride
Estimated Number of Participants: 600 - 800
Date of Activity (Month/Day/Year) From: 10/25/25 To: 10/25/25
Starting Time: 5 a.m. p.m. Disbanding Time: 10 a.m. p.m.
List any Special Equipment (hand carried, shown, displayed, props, stages, sound
equipment, and other structures) that will be used in assembly or rally areas
(If insufficient space, list on separate sheet) \\ \frac{\lambda}{\lambda} \frac{\lambda}{\lambda}
Parade/Demonstration Route/Assembly area (If insufficient space, list on separate
sheet) See attached
Please list street closures and why they are necessary (If insufficient space, list on
separate sheet) HWY 59@ E. Violet Ave. for participants to
I couse at beginning and and at mide
cross at beginning and end of ride.

Additional Application for Parade/Demonstration/Road Closure
(continued)
Number & Type of Vehicles: Bikes & Golf Carts ~ 400 bike ~ 20 golf ca
Number & Type of Animals: <u>NIVA-</u>
Number & Type of Bands: N/A
Number & Type of Banners: N/A
Number & Type of Signs: NIA
Number & Type of Special Props: NA
Number of Parade Marshals: 4
Speed (if applicable) units at which the Parade/Demonstration is to move:
Minimum: Maximum:
APPLICATION/PERMIT NOT VALID UNLESS SIGNED
Signature of person filing application/permit:
Printed name of person filing: Sara Harkins
Contact Information
Address:
Day Phone: Evening Phone:
Cell Phone: 251-233-1930 Fax:
Email: Sharkins early of folly org
No person or entity shall engage in, participate in, aid, form, join, incite, continue, organize, or start any Parade/Demonstration/Road Closure unless a Parade/Demonstration/Road Closure Permit has first been obtained from the Police Chief. The Police Chief, if he deems necessary, may require the applicant to designate a certain number of additional people who, along with the Event manager, shall be responsible for conducting the Parade/Demonstration/Road Closure in an orderly manner in compliance with the Parade/Demonstration/Road Closure Permit and other laws and regulations.
For Internal Use Only
Date Submitted: Application Approved Application Denied
Leisure Services Signature:
Police Chief's Signature (if needed):
Fire Chief's Signature (if needed):
0 ,

SATSUMA AVE PINE STREET OAK STREET PINE STREET ROSE AVE



SATURDAY OCTOBER 25

WITCHES TAKE FLIGHT AT 5:00 PM

VIOLET AVE.

VIOLET AVE.

FOLEY HERITAGE PARK