

SPECIAL EVENT APPLICATION

Haines City prides itself on the events, activities and celebrations that engage our community and enrich our quality of life. We look forward to reviewing your application, and if approved, working with you to make your event a success.

Please fill out the application on pages 2 - 8, and then provide any additional information requested in the sections specific to your type of event or in an attachment. Once you have completed, signed and dated the application, please mail or deliver it to Haines City Parks and Recreation (Lake Eva Community Center, 555 Ledwith Ave, Haines City, FL 33844), or scan and email the application to ljohansmeyer@hainescity.com at least 90 business days before your scheduled event date. You will need to provide an insurance certificate **at the time of your application**. If your event requires rental of any City facility, park or pavilion, indicate so on the Facility Use Request portion of this application. If your event is approved, you may need to complete additional facility rental agreements. For information regarding cost and availability, contact the Haines City Parks and recreation Department at (863) 421-3700.

Organizations seeking Haines City sponsorships/partnership for their Special Event must submit applications by end of business day, on September 1 of each year in advance for the next calendar year. If the due date falls on a weekend or holiday, it is due by the end of the following business day.

In some cases, after a preliminary review of the application, additional forms or information may be required and city staff will contact you if that is the case. Completion and submission of this form or any related forms does not guarantee final approval of the event.

In addition to City applications and forms, the event may require other County or State permits (i.e., food handlers' permits, mass gathering permits, etc.) before your event.

If you have any questions, please contact Parks & Recreation at (863) 421-3700. Thank you for helping make Haines City a great place to live, work and play!

SPECIAL EVENT APPLICATION

Agency/Organization Name: _____

Contact Name _____ Middle Initial _____ Last Name _____

Mailing Address _____ Apt. No. _____

City _____ State _____ Zip _____

Work Phone (_____) _____ Cell Phone (_____) _____

Email Address: _____

Yes, I would like to subscribe to the Haines City Manager free monthly e-newsletter _____ Yes _____ No

Is the event public or private? _____

Event Date(s): _____ Event Time(s): _____

Time of Operation: _____

(Please include time needed for set-up through the end of event break down. Attach a schedule if available)

Is this the first time for this event? _____ yes _____ no If no, how many years has the event been held? _____

Previous year's attendance: _____ Projected attendance: _____

Event description: _____

Proposed Event location: _____

(If you intend to hold your event at a Haines City facility, park or pavilion, a Facility Use Request, a site plan, reservation and fee may be required.)

Please answer the following questions. If your answer is "yes" to the questions, you will need to provide additional information as indicated:

Will there be a cost for admission? _____ yes _____ no If yes, list all admission fees.

Will food be served by your organization at this event? _____ yes _____ no

If yes, please contact Polk County Health Department requiring the need for a special permit.

Will there be vendor sales? _____ yes _____ no If yes, list type.

Note: All vendors must submit a Haines City Vendor Application Form and provide a certificate of insurance.

Will alcohol be served at the event? _____ yes _____ no

If yes, please you must submit a Haines City Alcohol Permit as well as show proof of a state Alcohol permit or license.

Note: Events include alcohol will be require to have Haines City Police present at a cost to your event.

Will there be outdoor music or sound amplification? _____ yes _____ no Indicate if you would like to use the band shell sound system.

Describe performances: _____

Please include a list of performers. Attach another sheet if necessary.

Will you be bringing in, setting up or staking any special equipment or attractions? ____ yes ____ no

If yes, please provide a description of the special equipment or attraction including tents, canopies, temporary fencing, and temporary staging. Location of all special equipment must be confirmed by Park staff.

Note: Please attach a complete list of commercial providers of any special equipment. Commercial providers of inflatables and other attractions (including but not limited to tents, canopies, temporary fencing, and temporary staging) must submit an insurance policy. Inflatables and other attractions and must be staffed during hours of operation. Also, you may be required to provide your own power for certain attractions.

How do you plan to publicize this event? Please include copies of promotional materials. If not available now, please supply as soon as possible.

____ Radio ____ TV ____ Newspaper ____ Internet ____ Calendars ____ Websites

Other: _____

Is another promoter/producer assisting you with your event? ____ yes ____ no

Name of the promoter: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____

Will this event utilize, cross or close any roads, sidewalks or trails? ____ yes ____ no

If yes, please attach a map with a proposed barricade plan. If State or county roads are involved, please attach proof of proper permitting from Polk County, or provide details of status.

Will any signs/banners be hung? ____ yes ____ no If yes, locations must be approved. List proposed locations below and attached a list of banner with wording:

Will this event require Haines City services (Park Staff, Police, Sanitation, power, water, etc.)? ____ yes ____ no

Note: Base on request there maybe fees associated with City services.

If your event requires port-a-johns provide the company's information below:

Name of company: _____

Contact: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____

Are you planning a Rain Date? ____ yes ____ no List your plans in case of inclement weather:

Other: List any other needs your event will require:

You must provide a certificate of insurance ONE MONTH PRIOR to your event of at least \$1 million per occurrence with a \$2 million aggregate limit naming Haines City, its officers, employees and volunteers as additional insured. The certificate must also state that coverage will not be canceled without ten days prior written notice to the City. If you already have a certificate of insurance, please attach a copy.

I agree that I and the organizers of this event will abide by all laws, rules and policies applicable to this event and will follow any instructions of the Haines City Staff and Police. I also acknowledge that completion and submission of this form or any other related forms does not guarantee final approval of my event. I have also read the attached policies and procedures that are applicable to my event.

PRINT NAME: _____

SIGNATURE: _____ DATE: _____

Special Event Facilities Use Request

Event Name: _____

Date: _____

Contact Person: _____

Lake Eva Park

____ Community Center* ____ Multi-purpose room ____ Gymnasium

____ Bandshell* ____ Dressing room: _____

____ Sound system

____ Pavilion* _____

____ Parking Lots ____ 3rd Street: ____ lower ____ upper

____ Aquatic Center

____ Event Center

____ Aquatic Center*

____ Event Center*

* Note: separate rental contracts will be require to reserve this facilities.

Oakland Neighborhood Center

____ ONC Auditorium*

____ Gymnasium*

____ ONC Multi-purpose room*

____ Cook Field* ____ Press Box ____ Basketball courts

8 Acre Park

____ Pavilion* _____

*Note: Separate rental agreements will be required to reserve this facilities.

Additional Service:

Electricity ____ Yes ____ No _____

Note: A detailed electrical plan will need to be finalized prior to your event, requiring you to determine the exact electrical needs of all vendors and participants.

Water ____ Yes ____ No _____

Tents

10 x 10 _____ @ \$10.00 subtotal: \$ _____

20 x 20 _____ @ \$20.00 subtotal: \$ _____

Trash barrels _____ @ \$2.00 subtotal: \$ _____

Tables (6ft) _____ @ \$3.00 subtotal: \$ _____

Chairs _____ @ \$1.00 subtotal: \$ _____

Total: \$ _____

Street Barricades: _____

Staff needs: _____

Note: There may be an additional cost for the use of Haines City street barricades and/or additional staffing needs.

For Parks and Recreation Department Use Only

Date received: _____

Staff: _____

Special Event review date: _____

Staff: _____

Support Documents:

___ Insurance Certificate Date: _____ Staff: _____
___ Facility Use Request Date: _____ Staff: _____
___ Rental Agreements Staff: _____
 Facility: _____ Date: _____
 Facility: _____ Date: _____
 Facility: _____ Date: _____
___ Vendor Application Forms Date: _____ Staff: _____
___ Vendor Insurance COI Date: _____ Staff: _____
___ Site Plan Date: _____ Staff: _____
___ Electrical needs Date: _____ Staff: _____
___ Port-a-john info Date: _____ Staff: _____

Rental/Fee Amount Due: _____

___ Payment: Amount: _____ CK #: _____ Date: _____ Staff: _____
___ Payment: Amount: _____ CK #: _____ Date: _____ Staff: _____

P&R Director approval: ___ yes ___ no If no, reason: _____

Signature: _____

Date: _____