



EVENT APPLICATION FORM (1B)

(Application to Hold a Parade/Race/Run/Walk in the City of Parksville)

Organization: _____ Name of Event: _____

Name of Parade Marshall/Contact Person: _____

Address: _____ Postal Code: _____

Phone: _____ Fax: _____ E-mail: _____

Signature of Applicant *Printed Name* *Date*

Date of Parade: _____ Day of Week: _____ Time: _____

Duration of Parade: _____ (hrs.)

Number and Type of units/participants: _____

(Note: Please provide a list of any other groups coming under the umbrella of this event)

General Description of Proposed Route (Please attach map): _____

Assembly Area: _____

Dispersal Area: _____

Closure of Street Required? Yes No (If Yes, which Streets?) _____

Traffic Control Arrangements: (Name of Company/Group and contact person)

Name: _____ Phone: _____

(NOTE: The responsibility for all traffic control rests with the body organizing the event. The City is not responsible to provide signage or barricades, nor will traffic signals be adjusted to accommodate the event.)

See Reverse side for Terms and Conditions - Signature required prior to submission for consideration.

This portion to be completed by City of Parksville

City Approval: Yes No

Date: _____

**TERMS AND CONDITIONS FOR
USE OF CITY OF PARKSVILLE FACILITIES**

1. Ensure appropriate public access is maintained to all roads, park and adjacent facilities to the satisfaction of the City of Parksville, and **provide written approval** from the RCMP, the Fire Department and the Ambulance Service;
2. Provide all of the necessary traffic controls, parking and emergency access acceptable to the RCMP, the Fire Department and the Ambulance Service;
3. Ensure that any charitable organization members performing traffic control and event parking, clearly state that **any parking fee is strictly by voluntary donation**, and ensure that **this information is visibly posted at the site and mentioned in any event advertisement**;
4. Hold and save harmless the City from and against all claims and damages arising out of, or in any way connected with, the event;
5. Depending on the nature of the activity and number of anticipated participants, you are required to **comply with the City's "Liability Insurance Coverage" Policy** and obtain and maintain during the term of this event, a comprehensive general liability insurance policy providing coverage, **to be determined by the City**, of not less than **\$2,000,000.00 and up to \$5,000,000.00**, naming the City of Parksville as an additional insured. A copy of the policy shall be delivered to the City a minimum of **10 working days** prior to the event;
6. **For events held on the Parksville Civic and Technology Centre site**, obtain and maintain during the term of this event, a comprehensive general liability insurance policy providing coverage of not less than \$5,000,000.00, naming the City of Parksville, School District No. 69 [Qualicum] and Vancouver Island University as additional insureds. A copy of the policy shall be delivered to the City a minimum of **10 working days** prior to the event;
7. Provide the City with a refundable security deposit of \$500.00 (to cover any loss or damage resulting from the event), to be delivered to the City a minimum of **10 working days** prior to the event;
8. Maintain and, if required, refurbish all municipal property and infrastructure to an equal or better condition than that which existed prior to the event, all within 48 hours of the completed event, to the satisfaction of the City of Parksville;
9. Ensure collection of litter from the event site/s, arranging with a waste disposal company for removal/dumping of bins following the event;
10. Make arrangements for installation of portable toilets, in quantity suitable to the expected attendance, for the duration of the event;
11. Ensure that any and all concessions (approved by the City with regard to their standing contract with the operator/s of the Park concession), meet all applicable health and safety requirements;
12. Approval for use of private property is the sole responsibility of the organizer/s.

Printed Name of Authorized Representative

Signature

Name of Organization

Date Signed