



## EVENT APPLICATION FOR USE OF VETERANS PARK

Permit Fee: \$200 (payable upon submittal of application). This fee is refundable if event application is not approved or is forfeited before final staff review.

**Event Type** (check all that apply):

- |  |                                  |   |                                 |
|--|----------------------------------|---|---------------------------------|
| <input type="checkbox"/> Running/Walking | <input type="checkbox"/> Wedding | <input type="checkbox"/> Fundraising            | <input type="checkbox"/> Picnic |
| <input type="checkbox"/> Concert         | <input type="checkbox"/> Party   | <input type="checkbox"/> Other (please specify) |                                 |

**Event Date(s)**\_\_\_\_\_ **Start Time**\_\_\_\_\_ **Est. End Time**\_\_\_\_\_

**Name of Organization**\_\_\_\_\_

**Street Address**\_\_\_\_\_ **City/State/Zip**\_\_\_\_\_

**Contact Name**\_\_\_\_\_

**Home Phone**\_\_\_\_\_ **Cell**\_\_\_\_\_ **Email**\_\_\_\_\_

**Day-of-Event Contact Name**\_\_\_\_\_ **Cell**\_\_\_\_\_

**Estimated Number of Participants**\_\_\_\_\_ **Estimated Number of Volunteers**\_\_\_\_\_

**Are there arrangements for:**

**Parking?**  Yes  No If so, where and how many spaces are available?

**Restrooms?**  Yes  No If so, where?

**Trash Collection?**  Yes  No If so, where?

**Do you plan to sell food to participants, spectators and/or volunteers?**

Yes  No If so, specify what food will be sold.

**Do you plan to serve food to participants? If so, please specify what food will be provided and how it will be served.**

Yes  No

What food?

How will it be served?

# EVENT PERMIT FOR USE OF PUBLIC STREETS

## PAGE 2

**Describe your plan for inclement weather.**

**Describe your medical plan**

### **Desired Location**

*Sketch location on another page and attach; indicate starting and ending location.*

### **Submitting Application**

Return completed application and \$200 application fee (payable by cash, check, or Visa/MC/Discover) to

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