

CITY OF BRODHEAD
APPLICATION FOR PUBLIC EVENT

Group Name: _____ Phone Number: _____
Address: _____ City: _____ State: _____

Applicant's Name: _____ Home Phone: _____
Business or Cell Phone: _____
Address: _____ City: _____ State: _____

Emergency Point of Contact at Event (If different than Applicant): _____
Name Phone Number

Type of Event: (Check all appropriate blocks):

- Block Party
- Parade/Street Closing

Event Date(s): _____ Start/End Time: _____

Name of Activity: _____ Purpose: _____

Assembly Area: _____ Dispersal Area: _____

Estimated Attendance: _____ or Number of Parade Units: _____

Location of Block Party: _____
(Block of – Street From – Street To)

Set-Up Date/Time: _____

Check All Appropriate Boxes:

- | | | | | | |
|--------------------------|--------------------------|-------------------------|--------------------------|--------------------------|-------------------------|
| Yes | No | | Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Street Closure | <input type="checkbox"/> | <input type="checkbox"/> | Amplification Equipment |
| <input type="checkbox"/> | <input type="checkbox"/> | Barricades Needed _____ | <input type="checkbox"/> | <input type="checkbox"/> | Musical Bands |

The person/group named on this application will be responsible for the conduct of the special event and for the condition of the facility.

The Applicant for her/himself and for other persons, organizations, firms and corporations, if any listed in this application, being of sound mind and body, do hereby freely, voluntarily and knowingly, now and for all times, agree to indemnify and hold harmless, the CITY OF BRODHEAD, a Wisconsin Municipal corporation located in the County of Green, and each and every of its elected and appointed officials, employees, representatives, agents, heirs, and assigns, jointly and severally from and against any and all claims, causes of action, actions, liabilities, demands, losses, damages, and/or expenses of whatsoever kind and nature including counsel of attorney's fees, arising from, resulting from, incurred in consequence of, or pertaining to, any and all intentional and negligent acts, omissions, incidents, activities and transactions, of whatever kind and nature, direct or indirect, caused by or resulting from the activities for which this permit is granted.

The special event sponsor shall submit a general liability insurance policy certificate in the amount of \$ _____ naming the CITY OF BRODHEAD as an additional insured party.

Applicants Signature: _____ Date: _____

Cc: Chief of Police, Public Works, Fire Department, Water & Light, Emergency Management Committee