

Springfield Park District
Walk / Event Application



Date of Event: _____

Start Time: _____ End Time: _____

Name of Park Requested: _____

Specific Area Requested: _____

Name of Organization: _____

Contact Person: _____

Street: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone Number: _____

Cell Number for Contact Person for day of the event: _____

Please provide a detailed description of Walk/Event. Be sure to include any Special Features you would like to include such as: bounce houses, tents, live music, etc. as they will require additional consideration.

Anticipated number of participants: _____

***Applicant will be required to supply a Certificate of Insurance naming the Springfield Park District as an additional insured in the amount of \$1 million at least 10 days prior to event. **If you are submitting a request for a bounce house the insurance covering the Springfield Park District needs to be \$2 million.**

BARRICADES

Do you request Barricades (Washington Park only): [] yes [] no

If barricades are requested, it is the renter's sole responsibility to set up and take down barricades (provided by park district) for event.

CONCESSIONS

Will you be serving Concessions? [] yes [] no

Please follow Guidelines and Permit Requirements of the Sangamon County Public Health Department, 2833 South Grand Ave E, Springfield, IL 62703 · (217) 535-3100 www.scdph.org.

VENDOR PLACARD FOR CONCESSIONS

Does lessee request permission to sell concessions? Yes [] No []

* If "yes" number of vendors will need to be reported and placards issued for all vendors selling food and or merchandise.

Vendor Add-On Fees will apply.

- 1 Vendor \$ 50.00
- 2-4 Vendors \$ 75.00
- 5-8 Vendors \$150.00
- Over 8 Vendors\$250.00

Vendor fees are due no less than 10 business days. All vendors must display the appropriate placard issued by the Springfield Park District on the date(s) of the event. Failure to display SPD issued placard could be subject to park ordinance and fines. Vendor is defined as for-profit entity selling goods or merchandise.

FEES

Additional trash cans & picnic tables provided, *if available*, at an additional fee

Event Fee \$ 150.00/Resident \$ 180.00/Non-Resident

Number of additional trash cans requested: _____ x \$ 3.00 each for first 10
_____ x \$ 4.00 each for each additional over 10

Number of additional picnic tables requested: _____ x \$ 10.00 each for first 5
_____ x \$ 13.00 each for each additional over 5

Other expenses _____ Shelter, indoor Facility Rental Fee, etc.
_____ Vendor Placard Fee (see pg. 1 of application)

(Names for placards are required 1 week prior to event)

Total Non-Refundable Fee \$ _____

Please submit application to: lcrowder@springfieldparks.org

Or by mail to: Springfield Park District
Attn: Event/Walk Application
2500 South 11th Street
Springfield, IL 62703

** Alcohol is strictly prohibited without prior approval. Written request is required for consideration.
Please allow no less than 8 weeks for review.

FOR OFFICE USE

Received:

- Certificate of Insurance
- Payment Received
- Vendor Names for Placards (10 business days prior to event)

R.12.2017

\walk event application\