



OUTDOOR SPECIAL EVENTS APPLICATION FORM

Name and Address of Organization:			
Type of Organization:			Non-Profit #:
Event Name:		Proposed Event Location:	
Event Organizer Name:	Email:	Phone:	
Event Organizer Mailing Address:			
Onsite Supervisor:	Email:	Phone:	
Event Dates:		Projected Peak Attendance:	
Event Start Time:		Event End Time:	
Setup Date:		Setup Times:	
Clean Up Date:		Clean Up Times:	
Require Vehicle Access? Yes / No	Charging Admission? Yes / No	Selling Merchandise? Yes / No	

Type of Event: (Check all That Apply)

- | | |
|---|---|
| <input type="checkbox"/> Run/Walk | <input type="checkbox"/> Fireworks Display |
| <input type="checkbox"/> Concert/Festival | <input type="checkbox"/> Inflatables (Activity Bouncer) |
| <input type="checkbox"/> Demonstration/Parade | <input type="checkbox"/> Petting Zoo |
| <input type="checkbox"/> Filming | <input type="checkbox"/> Concession |
| <input type="checkbox"/> Fundraising Event | <input type="checkbox"/> Beer Gardens |
| <input type="checkbox"/> Party/Reception | <input type="checkbox"/> Wedding Ceremony |
| <input type="checkbox"/> Sporting Event | <input type="checkbox"/> Open Water |
| <input type="checkbox"/> Other _____ | |



Detailed Description of the Event: (Include Primary Purpose, Goals and Objectives)

Provide Details for a Weather Contingency Plan:

Event Requirements: (Check all That Apply)

Kinsmen Park:

- | | |
|---|--|
| <input type="checkbox"/> Amphitheatre | <input type="checkbox"/> East Picnic Shelter |
| <input type="checkbox"/> Amphitheatre Cover | <input type="checkbox"/> West Picnic Shelter |

Equipment Rentals:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Mobile Stage | <input type="checkbox"/> Portable Stage (16- 4'x 8' sections available)
How many sections _____
How many sets of stairs (1 or 2) _____ |
|---------------------------------------|--|

Provide Details on the Locations or Sport Fields to be Used:



Other Requirements:

- | | | |
|---|--|---|
| <input type="checkbox"/> Power Supply | <input type="checkbox"/> Water Supply | <input type="checkbox"/> Lights |
| <input type="checkbox"/> Garbage Bins_____ | <input type="checkbox"/> Recycling Bins_____ | <input type="checkbox"/> Bleachers |
| <input type="checkbox"/> Irrigation Locates | <input type="checkbox"/> Barricades | <input type="checkbox"/> Snow Fencing _____ft |
| <input type="checkbox"/> Snow Removal | <input type="checkbox"/> Street Sweep | <input type="checkbox"/> City Concession |

Site Specifications:

Please attach a detailed map of the location to be used and include the following:

- Tents to be erected
- Temporary stages
- Portable washrooms
- Garbage/recycling
- Generators

Additional Responsibilities - Please provide information on the following:

Parking Plan:

Event Security:

Traffic Control:

Site Clean Up Plan:

Emergency Vehicle Access:



I confirm that all details in the application are said to be true and that I will notify the City of Prince Albert of any changes made to the information provided in the application.

_____	_____	_____
Applicant Name and Title	Applicant Signature	Date

City of Prince Albert Approval – Outdoor Special Event Permit

Approval of this application serves as a *City of Prince Albert Outdoor Special Event Permit*

_____	_____	_____
Name and Title	Signature	Date

APPROVED (YES OR NO) _____

Office Use:

Contract # _____ Approved: _____

Invoiced: _____ Receipt #: _____



City of
Prince Albert

COMMUNITY SERVICES DEPARTMENT

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