QUISPAMSIS
There Is No Other

SPECIAL EVENT APPLICATION APPROVAL

Date of Event: _____

Name of Event: _____

Applicant Organization: _____

Contact Information

Contact Person: _____
Mailing Address: _____
_____
_____
Postal Code: _____

Daytime Phone: _____
Home Phone: _____
Cellular Phone: _____
E-mail: _____

On-site Contact: _____
Mailing Address: _____
_____
_____
Postal Code: _____

Daytime Phone: _____
Home Phone: _____
Cellular Phone: _____
E-mail: _____

Event Details

Event Description:

_____
_____
_____
_____
_____

Describe the benefit of this event to the community:

_____
_____
_____
_____

Event Budget: _____ Please attach list of sponsors or potential sponsors

Event Location: _____
Has event occurred before: Yes ☐ No ☐
If yes, date(s): _____
# of Participants/Spectators: _____

Set up time: _____
Event Start Time: _____
Event End Time: _____
Clean Up Time: _____

Will your event require any of the following:

Street Closures:	Yes ☐	No ☐	If yes, include information on Races, Parades, Roadways Map
Access to multiple municipal locations:	Yes ☐	No ☐	If yes, include information on Site Map
Parking:	Yes ☐	No ☐	If yes, include information on Site Map

Outline your plan for notifying businesses/residents who will be affected by this event and when this will be completed by:

_____

_____

_____

_____

_____

Activities and Site Set Up

Will your event include any of the following:

Food/Vending:	Yes ☐	No ☐	Vendor: _____
Alcohol:	Yes ☐	No ☐	Liquor license? (Please attach): Yes ☐ No ☐
Entertainment:	Yes ☐	No ☐	Source: _____
Tents/Inflatables/ Temporary Structures:	Yes ☐	No ☐	List all (include quantity, size, ownership, location and type of anchorage): _____
Police Department:	Yes ☐	No ☐	
Fire Department:	Yes ☐	No ☐	
Medical Service:	Yes ☐	No ☐	
Professional Security:	Yes ☐	No ☐	Company/Contact Information: _____

What Town resources do you require in order to hold your event?
Please be specific with these details, include numbers for items required, work required and any other information which may be relevant:

_____

_____

_____

_____

_____

Additional Comments:

_____

_____

_____

_____

☐ I/we uphold our obligations under the New Brunswick Human Rights Act and will continue to do so at all times while using town property pursuant to this agreement

☐ I/we undertake to be considerate of all other users of town property and respect their right to enjoy town facilities while this rental agreement is in place. If, in the town's sole opinion, this right may be compromised OR if the safety or security of other users or town residents becomes at risk as a result of any of my/our activities the town shall have the right to immediately cancel this agreement on the advice of local law enforcement. My/our conduct during prior rentals of town or other property may be taken into consideration by the town in the foregoing assessment of risk.

☐ I/we agree that a cancellation of this agreement or our failure to comply with all terms of this agreement will constitute sufficient cause for the town to deny future rentals to me/us.

NOTICE

The town of Quispamsis does not, by virtue of entering into this agreement, in any way endorse the content of materials presented by organizations renting town property which are inconsistent with town policies, mission and vision statements and statements of guiding principles.

All events on the Town of Quispamsis property need to have Commercial Liability Insurance.

Number of Participants	Hourly	Per Day
0-25	$1.50	$25
26-50	$3.00	$30
51-100	$5.00	$35
100+	$8.00	$40

Insurance: ALL BOOKINGS MUST HAVE INSURANCE.

☐ I have insurance (if you carry Commercial General Liability Insurance, please provide a copy with the addition of the Town of Quispamsis as insured, you must have no less the $5 million per occurrence against all claims for bodily/personal injury including and resulting in death and property damage).

- Proof of insurance is required no later than 2 weeks before booked date, insurance must remain in effect for the duration of the booking.

☐ I would like to purchase insurance from the Town of Quispamsis (see Facility User Liability Insurance Coverage rate chart and other documents on our website. www.quispamsis.ca).

- Purchase of the Facility User Liability Insurance coverage must be done at the time of booking if no other insurance is in place.

The Town of Quispamsis reserves the right to cancel this agreement or any reserved/booked times upon notification, or by reason beyond the control of the Town of Quispamsis, (weather, power outages, mechanical failure, emergency, or any other unforeseen conditions).

General insurance costs will be evaluated with information provided:

I, _____ am the person authorized to execute documents on behalf of _____ (the applicant organization).

The applicant organization does hereby agree to indemnify and save harmless the Town of Quispamsis in respect to any and all claims, demands, suits and costs arising out of any act or omission of the organizer or of any servant, agent or officer of the organizer arising out of or resulting from the use of the site/route by the organizer.

On behalf of the applicant organization, I acknowledge that I have read and understood the conditions contained in the *Guidelines for Special Events Applications* and agree to comply with them.

Signature: _____ Date: _____

QUISPAMSIS
There Is No Other

Forms may be submitted by mail to:
Community Services
Administration Manager
Town of Quispamsis
12 Landing Court
Quispamsis, NB E2E 4R2
or by fax to: (506) 848-5910
or by e-mail to:
communityservice@quispamsis.ca
T: (506) 848-5900

Have you attached the following relevant documents to this application?:

List of Sponsors/Potential Sponsors	Yes ☐ No ☐ NA ☐
Races/Walk/Parade Route Map:	Yes ☐ No ☐ NA ☐
For parades, line-up with list of floats, walkers and vehicles:	Yes ☐ No ☐ NA ☐
Site Map of the event location:	Yes ☐ No ☐ NA ☐
Liquor License	Yes ☐ No ☐ NA ☐
Safety Plan	Yes ☐ No ☐ NA ☐
Copy of Insurance	Yes ☐ No ☐ NA ☐
List of event staff and volunteers:	Yes ☐ No ☐ NA ☐