



Submit

Print

Park City Municipal Corporation

Special Event Permit Application

Special Events Department
 City Hall, Third Floor
 445 Marsac Avenue
 P.O. Box 1480
 Park City, Utah 84060
specialevents@parkcity.org

**APPLICATIONS DO NOT CONSTITUTE AS A PERMIT.
 PERMITS ARE APPROVED BY THE SPECIAL EVENTS DEPARTMENT OR CITY COUNCIL IN WRITING AFTER COMPLETE APPLICATIONS ARE REVIEWED UNDER PARK CITY MUNICIPAL CODE 4-8.**

Applications for Special Event Permits are due no later than 90 days (Level 3), 60 days (Level 2), or 30 days (Level 1) prior to an event. Incomplete applications cannot be reviewed. Applications submitted after the deadlines as described above may be denied. More information can be found at www.parkcity.org or by contacting specialevents@parkcity.org.

IF YOU HAVE QUESTIONS, OR WOULD LIKE TO SCHEDULE A MEETING BEFORE SUBMITTING YOUR APPLICATION, PLEASE CONTACT:

Tommy Youngblood tommy.youngblood@parkcity.org	435.615.5187	Jenny Diersen jenny.diersen@parkcity.org	435.615.5188
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APPLICATION FEES & EXPENSES

- | | |
|----------------------------------|----------|
| Level Three Special Event Permit | \$160.00 |
| Level Two Special Event Permit | \$80.00 |
| Level One Special Event Permit | \$40.00 |
- Application Levels are determined by the Special Events Department after reviewing complete applications.
 - Additional fees for other City Services will be estimated and provided to the applicant upon receipt of a complete application.
 - Applicants may incur additional expenses from other City, County or State jurisdictions.
 - Fee Reductions for some City Services are considered bi-annually. Fee Reduction Applications are due on:
 - April 1, for events July 1 – December 31; and October 1, for events January 1 – June 30.

AS THE APPLICANT YOU UNDERSTAND & AGREE TO THE FOLLOWING: (Check all that you understand and agree to)

- To insure prompt and accurate processing of your application, ensure that ALL support materials and documentation accompany your application. Failure to do so will constitute an incomplete application and may delay review and approval processes. I understand a complete application shall include this application completed, with traffic and transportation plan, contingency plan – including operations plan, emergency plan, weather conditions and residential and notification outreach plan; site plan and permission of use for properties.
- Park City Municipal Corporation requires a certificate of insurance in an amount to be determined by the City Attorney's Office. Submitting incomplete application information may delay the ability to determine the amount required. The amount of insurance required by the City Attorney's office is final and the applicant shall be required to submit proof of coverage including naming Park City Municipal Corporation, 445 Marsac, P.O. Box 1480, Park City, Utah 84060 as additionally insured prior to the start of any event activity.
- After the application is evaluated, the applicant will be responsible for providing proof that I have obtained other permits as necessary from City, County or State agencies, as well as the application fee amount based on the Level of event.
- I understand that as the applicant, I will assume and reimburse the City for any and all costs and expenses determined by Park City Municipal Corporation. Park City Municipal Corporation may require a deposit to cover such expenses. I may incur costs from other departments or other jurisdictional agencies. I understand I can request an estimate of City Services for the event upon submitting a complete application, and that should I choose to, I can request a reduction of fees for some services as pertains to Park City Municipal code 4-8-9 through the bi-annual fee reduction application and process.
- I understand I am able to request a meeting with the Special Events Department prior to submitting an application and that this application does not constitute as a valid permit. I understand that permits are approved by the Special Events Department or City Council in writing after complete applications are reviewed under Park City Municipal Code 4-8.

APPLICANT AND SPONSORING ORGANIZATION INFORMATION

NAME OF EVENT: **March for our lives**

FIRST TIME EVENT:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	ANNUAL EVENT:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IF ANNUAL, HOW MANY YEARS:		
ANNUAL EVENT THAT WILL BE THE SAME AS LAST YEAR:						Yes	<input checked="" type="checkbox"/>	No
ANNUAL EVENT THAT WILL HAVE CHANGES FROM LAST YEAR:						Yes	<input checked="" type="checkbox"/>	No

NAME OF APPLICANT (FIRST & LAST): **Maya Levine & students of park city**

TITLE / POSITION: **organizers**

BUSINESS / ORGANIZATION NAME: **students for social change**

IS BUSINESS / ORGANIZATION A REGISTERED NON-PROFIT	Yes, a copy of IRS paperwork is attached	<input type="checkbox"/> No
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MAILING ADDRESS OR BUSINESS / ORGANIZATION: **[REDACTED]**

CITY, STATE, ZIP: **park city utah 84098**



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PHYSICAL ADDRESS OF BUSINESS / ORGANIZATION:										
CITY, STATE, ZIP:										
PHONE (PRIMARY):	PHONE (SECONDARY):									
EMAIL: [REDACTED]										
BUSINESS / ORGANIZATION WEBSITE:										
SOCIAL MEDIA LINKS: facebook event page march for our lives 10am on 3/24										
DAY OF EVENT PRIMARY CONTACT										
ON-SITE DAY OF PRIMARY CONTACT NAME (FIRST & LAST): Maya Levine and TBD										
ON-SITE DAY OF PRIMARY CONTACT CELL PHONE: TBD										
ON-SITE DAY OF PRIMARY CONTACT EMAIL: TBD										
PUBLIC EVENT INFORMATION										
WEB SITE FOR PUBLIC EVENT INFORMATION:										
PHONE NUMBER FOR PUBLIC EVENT INFORMATION:										
EMAIL ADDRESS FOR PUBLIC EVENT INFORMATION:										
Overall event description is attached as a separate document, with the contingency plan and is submitted with the application.										
EVENT LEVEL DETERMINATION										
THE EVENT WILL INCLUDE THE FOLLOWING ACTIVITIES: (Check all that apply)										
<input type="checkbox"/> FESTIVAL / FAIR	<input type="checkbox"/> PARADE	<input type="checkbox"/> SKI / SNOW BOARD	<input type="checkbox"/> RUN	<input type="checkbox"/> BIKE	<input type="checkbox"/> WALK	<input type="checkbox"/> TRAIL USE	<input type="checkbox"/> CONCERT	<input type="checkbox"/> CULINARY	<input type="checkbox"/> FILMING	
<input type="checkbox"/> ARTS & CULTURE EVENT	<input type="checkbox"/> HOLIDAY CELEBRATION	<input type="checkbox"/> RECREATION / SPORTING EVENT		<input type="checkbox"/> OTHER:						
THE EVENT WILL INVOLVE THE USE OF: (Check all that apply)										
<input type="checkbox"/> MAIN STREET	<input type="checkbox"/> RESORT PROPERTY	<input type="checkbox"/> SCHOOL DISTRICT PROPERTY	<input type="checkbox"/> PRIVATE PROPERTY	<input type="checkbox"/> CITY PARKS	<input type="checkbox"/> CITY FIELDS	<input type="checkbox"/> CITY FACILITY RENTAL	<input type="checkbox"/> RESIDENTIAL AREAS	<input type="checkbox"/> PARK CITY LIMITS	<input type="checkbox"/> MULTI-JURISDICTION	<input type="checkbox"/> AMPLIFIED SOUND
THE TARGET MARKET FOR THIS EVENT IS: (Check all that apply)										
<input checked="" type="checkbox"/> YOUTH / FAMILIES	<input checked="" type="checkbox"/> ADULTS	<input checked="" type="checkbox"/> LOCAL	<input type="checkbox"/> STATE-WIDE	<input checked="" type="checkbox"/> REGIONAL	<input type="checkbox"/> NATIONAL	<input type="checkbox"/> INTER NATIONAL	<input type="checkbox"/> SPECTATORS	<input type="checkbox"/> PARTICIPANTS	<input type="checkbox"/> OTHER:	
THIS EVENT WILL: (Check all that apply)										
<input type="checkbox"/> LIMIT # OF PARTICIPANTS	<input type="checkbox"/> BE FREE FOR SPECTATORS	<input checked="" type="checkbox"/> BE FREE FOR PARTICIPANTS	<input type="checkbox"/> INCLUDE VENDORS OR SPONSOR	<input type="checkbox"/> BE FREE AND OPEN TO THE PUBLIC						
<input type="checkbox"/> LIMIT # OF SPECTATORS	<input type="checkbox"/> CHARGE ADMISSION FOR SPECTATORS	<input type="checkbox"/> CHARGE PARTICIPANTS	<input type="checkbox"/> NOT INCLUDE VENDORS OR SPONSOR	<input type="checkbox"/> BE A PRIVATE EVENT						
THIS EVENT WILL BE HELD: (Check all that apply)										
EVENT DATE(S):										
<input type="checkbox"/> MONDAY	<input type="checkbox"/> TUESDAY	<input type="checkbox"/> WEDNESDAY	<input type="checkbox"/> THURSDAY	<input type="checkbox"/> FRIDAY	<input type="checkbox"/> SATURDAY	<input type="checkbox"/> SUNDAY				
<input type="checkbox"/> WEEKLY		<input type="checkbox"/> MONTHLY		<input type="checkbox"/> SERIES		<input checked="" type="checkbox"/> ONE DAY				
NUMBER OF EVENT(S): 1			# OF CONSECUTIVE DAYS: 1							



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ONE DAY EVENT HOUR(S)			
EVENT HOUR(S): 8am		OPENING TIME: 10am	EVENT ENDS:
EVENT SET-UP DATE: 3/24		BREAK-DOWN DATE:	
SET-UP TIME(S): 8am to noon		BREAK-DOWN TIME(S): noon	
MULTIPLE DAY EVENT HOUR(S) – If different for each date			
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
INCLIMATE WEATHER INFORMATION:			
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
<input type="checkbox"/> No inclement weather date is required, and the event will be held rain or shine. I understand the event may be cancelled or postponed by the city due to hazardous or damaging conditions			
EVENT ATTENDANCE (Complete all that apply)			
IF ANNUAL EVENT:			
TOTAL EVENT ATTENDANCE OF PREVIOUS YEAR:		TOTAL DAILY EVENT ATTENDANCE OF PREVIOUS YEAR:	
ALL APPLICANTS MUST COMPLETE THE FOLLOWING SECTION (NEW OR ANNUAL EVENTS)			
ESTIMATED # OF PARTICIPANTS: 500		ESTIMATED # OF VENDORS:	
ESTIMATED # OF SPECTATORS:		ESTIMATED # OF VOLUNTEERS:	
ESTIMATED # OF STAFF: 25		ESTIMATED DAILY ATTENDANCE:	
ESTIMATED HIGHEST TOTAL ATTENDANCE AT ONE TIME:		ESTIMATED TOTAL ATTENDANCE OF ENTIRE EVENT:	
<input type="checkbox"/> I anticipate the event to have an attendance of 500 or more people and understand, as the applicant, I may be required to obtain a mass gathering permit from summit county: http://www.summitcountyhealth.org/			



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SIDEWALK & STREET USE (circle and complete all that apply)			
THE EVENT WILL HAVE:			
STREETS			
<input type="checkbox"/> STREET CLOSURE MAP IS ATTACHED		CLOSURE SIGN / MARKING	
<input type="checkbox"/> ROLLING CLOSURE	<input type="checkbox"/> PARTIAL CLOSURE	<input type="checkbox"/> FULL CLOSURE	<input type="checkbox"/> NO CLOSURE
NAMES OF STREETS TO BE CLOSED:		TIMES: (START / END OF CLOSURE)	
		START:	END:
REASON FOR CLOSURE:			
SIDEWALKS			
<input type="checkbox"/> SIDEWALK CLOSURE MAP IS ATTACHED		CLOSURE SIGN / MARKING	
<input type="checkbox"/> PARTIAL CLOSURE	<input type="checkbox"/> FULL CLOSURE	<input type="checkbox"/> NO CLOSURE	<input type="checkbox"/> CROWD CONTROL PLAN
ADDRESS:			
ADDRESS OF CLOSURE: (FROM / TO)		TIMES: (START / END OF CLOSURE)	
FROM:	TO:	START:	END:
FROM:	TO:	START:	END:
FROM:	TO:	START:	END:
FROM:	TO:	START:	END:
REASON FOR CLOSURE:			
TRAILS			
<input type="checkbox"/> TRAIL COURSE MAP IS ATTACHED		<input type="checkbox"/> COURSE / SIGN MARKING INFORMATION IS ATTACHED	
NAMES OF TRAILS TO BE USED:			
PARADE			
ASSEMBLY AREA:		DISBANDING AREA:	# OF PARADE ATTENDEES:
PARADE IS:			
<input type="checkbox"/> WALKING ONLY	<input type="checkbox"/> VEHICLES & WALKING	<input type="checkbox"/> VEHICLES ONLY	<input type="checkbox"/> WILL HAVE ANIMALS
OTHER PARADE INFO:			



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CITY PARKING FACILITIES REQUEST			
GENERAL PARKING (Where will you be directing event attendees to park cars?)			
HOW MANY PARKING SPACES DOES THE EVENT NEED?		AT HIGHEST POINT?	
<input type="checkbox"/> MAIN STREET	<input type="checkbox"/> CHINA BRIDGE	<input type="checkbox"/> FLAGPOLE LOT	<input type="checkbox"/> BREW PUB LOT
<input type="checkbox"/> SANDRIDGE PARKING LOTS	<input type="checkbox"/> PARK AVENUE	<input type="checkbox"/> CITY PARK	<input type="checkbox"/> MAWHINNEY LOT
<input type="checkbox"/> QUINNS LOT	<input type="checkbox"/> RICHARDSON FLATS		OTHER:
WILL THE EVENT PROVIDE TRANSPORTATION SERVICES TO THE EVENT FROM PARKING AREAS?:			YES NO
ADA PARKING AVAILABLE?:			YES NO
THE EVENT WILL REQUIRE PARKING REMOVAL?:			YES NO
The event will require parking removal as indicated below, and I will complete a special use of public parking application as required with the Park City Parking Services Department			
NAME OF AREA OR STREETS:		BETWEEN:	
TIME – START / END:		REASON (what/who):	
NAME OF AREA OR STREETS:		BETWEEN:	
TIME – START / END:		REASON (what/who):	
NAME OF AREA OR STREETS:		BETWEEN:	
TIME – START / END:		REASON (what/who):	
NAME OF AREA OR STREETS:		BETWEEN:	
TIME – START / END:		REASON (what/who):	
TRANSPORTATION			
WILL THE EVENT PROVIDE ALTERNATIVE TRANSPORTATION OPTIONS?			
<input type="checkbox"/> BUS	<input type="checkbox"/> BIKE	<input type="checkbox"/> WALK	
<input type="checkbox"/> THE APPLICANT IS PROVIDING SHUTTLE OR BUS TRANSPORTATION OUTSIDE OF THE CITY'S SCHEDULE. THE APPLICANT HAS PROVIDED BUS DROP OFF AREA ON THE SITE MAP ATTACHED WITH THIS APPLICATION.			
NAME OF TRANSPORTATION PROVIDER / COMPANY:			
PHONE:		EMAIL:	
<input type="checkbox"/> THE APPLICANT IS PROVIDING BIKE TRANSPORTATION AT THE EVENT. WE HAVE PROVIDED BIKE PARKING AREAS ON THE SITE MAP WITH THIS APPLICATION.			
<input type="checkbox"/> WE ARE PROVIDING WALKING AS AN OPTION TO ATTEND THE EVENT. WE HAVE PROVIDED WALKING PATH IDEAS ON THE SITE MAP WITH THIS APPLICATION.			
ADDITIONAL TRANSPORTATION INFORMATION:			
PUBLIC FACILITY USE			
CHECK ALL THAT APPLY:	MINERS HOSPITAL AT CITY PARK	PARK CITY LIBRARY MEETING ROOMS	JIM SANTY AUDITORIUM
	SOUTH CITY PARK	CITY PARK COVERED BBQ AREA	CITY PARK GAZEBO / STAND
	CITY PARK SOFTBALLFIELD	CITY PARK RUGBY FIELD	SKATE PARK AT CITY PARK
	QUINN'S SPORTEX FIELDS	ROTARY PARK	SCHOOL DISTRICT FIELDS
	DIRT JUMP PARK	PARK CITY ICE ARENA	OTHER:



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TEMPORARY STRUCTURES & FLAMMABLE MATERIALS										
I UNDERSTAND ALL TEMPORARY STRUCTURES AND FLAMMABLE MATERIALS MUST BE APPROVED BY THE PARK CITY BUILDING DEPARTMENT. SUCH INSPECTIONS WILL REQUIRE A FIRE/BUILDING PERMIT TO BE SUBMITTED 10 DAYS BEFORE THE EVENT, AS WELL AS AN INSPECTION THE DAY OF THE EVENT.										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
TEMPORARY BLEACHERS	INFLATABLES	CANOPIES	TEMPORARY BADGES	TEMPORARY LIGHTING						
<input type="checkbox"/>	TENTS 10X10 OR UNDER	HOW MANY:								
<input type="checkbox"/>	TRAILER	HOW MANY:								
<input type="checkbox"/>	STRUCTURES OVER 6 FEET TALL	PURPOSE:						HOW MANY:		
DOES EVENT HAVE ELECTRICAL NEEDS?:			YES	NO	DOES EVENT REQUIRE USE OF GENERATORS			YES	NO	
WILL YOU BE REQUESTING PERMITS FOR FIREWORKS?:								YES	NO	
WILL THE EVENT REQUIRE THE USE OF FLAMMABLE MATERIALS, FUELS OR GASSES?:								YES	NO	
NAME SUCH MATERIALS:										
WASTE MANAGEMENT AND RECYCLING										
<input type="checkbox"/> THE EVENT WILL PROVIDE ITS OWN GARBAGE CANS AND WASTE MANAGEMENT.										
<input type="checkbox"/> THE EVENT WILL PROVIDE ITS OWN DUMPSTERS, WHICH IS INDICATED ON THE SITE MAP.										
<input type="checkbox"/> THE EVENT WILL USE THE CITY'S GARBAGE CANS AND WASTE MANAGEMENT, REQUIRING ADDITIONAL FEES.										
<input type="checkbox"/> THE EVENT WILL USE THE CITY'S DUMPSTERS, REQUIRING ADDITIONAL FEES.										
<input type="checkbox"/> THE EVENT WILL HIRE A COMPANY AND PROVIDE RECYCLING SERVICES FOR THE FOLLOWING MATERIALS:										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
PLASTIC	PAPER	ALUMINUM	GLASS	CARDBOARD	COMPOST	OTHER				
<input type="checkbox"/> THE EVENT WILL UTILIZE CITY RESTROOM FACILITIES (List areas of city restroom facilities below:										
<input type="checkbox"/> THE EVENT WILL BRING ITS OWN RESTROOMS AND SANATARY STATIONS. (May be required by Summit County Health Department or Park City Building Department)										
WILL ANIMALS BE AT THE EVENT?:			YES	NO	IF YES, PLEASE DESCRIBE TYPE OF ANIMALS AND WASTE PLANS					
TYPES OF ANIMALS:										
<input type="checkbox"/> I HAVE INCLUDED THE PLACEMENT OF THE ANIMALS IN THE SITE MAP OR LINE UP IN THE CONTINGENCY PLAN										
WILL DOGS BE ALLOWED AT THE EVENT?:			YES	<input checked="" type="checkbox"/>	NO	LEASHED		UNLEASHED		
<input type="checkbox"/> WASTE MANAGEMENT PLAN HAS BEEN DESCRIBED IN THE CONTINGENCY PLAN ATTACHED TO THIS APPLICATION.										
FOOD & MERCHANDISE SALES										
<input checked="" type="checkbox"/> I UNDERSTAND THAT ALL VENDORS MUST OBTAIN A PARK CITY BUSINESS LICENSE. ALL VENDORS SERVING FOOD OR DRINKS MAY BE REQUIRED TO OBTAIN A FOOD SERVICE OR FOOD HANDLERS PERMIT FROM SUMMIT COUNTY.										
WILL THERE BE SALE OF MERCHANDISE?:								YES	NO	
WILL THERE BE COMPLIMENTARY FOOD?:								YES	NO	
WILL THERE BE SALE OF FOOD?:								YES	NO	
WILL THERE BE ALCOHOL FOR SALE?:								YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>		
BEER	WINE							LIQUOR		
<input type="checkbox"/> I HAVE CONTACTED THE PARK CITY FINANCE DEPARTMENT REGARDING REQUIREMENTS FOR BEER & LIQUOR LICENSES.										



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<input type="checkbox"/> I UNDERSTAND THAT THE UTAH DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL (UDABC) MAY REQUIRE OTHER PERMITS.			
WILL FOOD ITEMS BE PRE-PACKAGED?:		YES	NO
WILL FOOD ITEMS BE COOKED ON SITE?:		YES	NO
<input type="checkbox"/> I UNDERSTAND THAT IF COOKING IS ONSITE, A PARK CITY BUILDING/FIRE PERMIT MAY BE REQUIRED.			
WILL FOOD ITEMS BE PREPARED OFFSITE?:		YES	NO
DESCRIBE ITEMS:			
TEMPORARY SIGNS			
WILL THERE BE TEMPORARY SIGNS AT THE EVENT?:		<input checked="" type="checkbox"/> YES	NO
<input type="checkbox"/> I HAVE ATTACHED A SIGN PLAN DESCRIBING THE CONTENT, SIZES AND LOCATIONS IN THE CONTINGENCY PLAN.			
SAFETY - SECURITY			
<input type="checkbox"/> THE EMERGENCY AND SECURITY PLAN HAS BEEN ATTACHED IN THE OPERATIONS PLAN, INCLUDING CROWD CONTROL, ACCESS, FIRST AID. AFTER REVIEW OF THIS APPLICATION, REQUIREMENTS FOR EMTS, FIRE AND POLICE SERVICES WILL BE DETERMINED AS PART OF THE CONDITIONS OF APPROVAL OF THIS EVENT. THE SPECIAL EVENTS DEPARTMENT WILL BE ABLE TO GIVE THE APPLICANT AN ESTIMATE OF SUCH CITY SERVICE REQUIREMENTS.			
<input type="checkbox"/> THE EVENT WILL REQUIRE LAW ENFORCEMENT SERVICES BEYOND ROUTINE PERIODIC PATROL.			
<input type="checkbox"/> THE EVENT WILL NOT REQUIRE LAW ENFORCEMENT SERVICES BEYOND ROUTINE PERIODIC PATROL.			
COMMUNICATION NEEDS			
WILL THERE BE INSTALLATION OF AN ANTENNA FOR COMMUNICATION NEEDS?:		YES	NO
<input type="checkbox"/> INSTALLATION OF AN ANTENNA FOR COMMUNICATION IS INDICATED IN THE SITE PLAN WITH SPECIFICATIONS.			
MARKETING OF EVENT			
PROPER MARKING OF YOUR EVENT IS VITAL TO ITS SUCCESS. PLEASE CONTACT THE PARK CITY CHAMBER FOR ADDITIONAL INFORMATION AND ASSISTANCE: www.visitparkcity.com			
<input type="checkbox"/> I HAVE CHOSEN TO LIST INFORMATION REGARDING MY EVENT ON THE PARK CITY CHAMBER'S WEBSITE.			
<input type="checkbox"/> I HAVE CHOSEN NOT TO LIST INFORMATION REGARDING MY EVENT ON THE PARK CITY CHAMBER'S WEBSITE.			
WHO IS THE TARGET MARKET FOR THIS EVENT?:			
WHERE IS THE TARGET MARKET FOR THIS EVENT?: (choose all that apply)			
<input checked="" type="checkbox"/> LOCAL	<input checked="" type="checkbox"/> REGIONAL	<input type="checkbox"/> NATIONAL	<input type="checkbox"/> INTERNATIONAL
WILL THIS EVENT BE FILMED AND TELEVISED?: (choose all that apply)		YES	NO
<input checked="" type="checkbox"/> LOCAL	<input checked="" type="checkbox"/> REGIONAL	<input type="checkbox"/> NATIONAL	<input type="checkbox"/> INTERNATIONAL
PLEASE LIST ALL ADVERTISEMENT INCLUDING MEDIA COVERAGE, NEWSPAPER AND MAGAZINES:			
MEDIA (RADIO/TV):			
NEWSPAPER:			
MAGAZINES:			
OTHER:			
PLEASE SELECT RANGE OF MARKETING BUDGET:			
<input type="checkbox"/> \$100 OR UNDER	<input type="checkbox"/> \$100 - \$500	<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,000 - \$2,500
			<input type="checkbox"/> ABOVE \$2,500



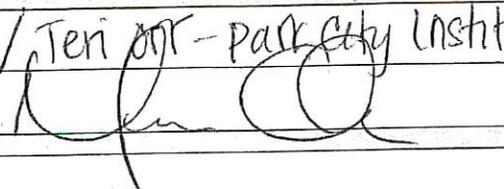
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APPLICANT AGREEMENT & SIGNATURE

I, the undersigned representative, have read the rules and regulations with reference to this application and am duly authorized by the organization to submit this application on its behalf. The information contained herein, including supporting documentation is complete and accurate.

Name (Printed):	Maya Levine / Ten on - park city institute	
Signature:	Maya Levine 	Date: 2/23/18



PARK CITY MUNICIPAL CORPORATION
Special Event Hold Harmless and Indemnification Agreement

This Hold Harmless and Indemnification Agreement must be completed and returned to the Special Event Manager ten (10) working days prior to the event or the event will be cancelled.

PLEASE PRINT

maya levine / Ten off

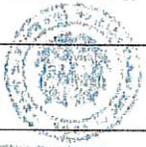
Name of Applicant

march for our lives

Name of Special Event

March 24th 10am

Date(s) of Event



Each person signing this Agreement represents and warrants that he or she is duly authorized and has legal capacity to execute and deliver this Agreement. Each party represents and warrants to Park City Municipal Corporation that the execution and delivery of the Agreement and the performance of such party's obligations hereunder have been duly authorized and that the Agreement is a valid legal agreement and binding on such party and enforceable in accordance with its terms.

The person signing this Agreement represents and warrants to Park City Municipal Corporation that it has insurance coverage in place that covers the scope of activities associated with this event. This person further represents and warrants that the insurance coverage limits meet or exceed the coverage required to obtain this permit.

For and in consideration of Park City Municipal Corporation (PCMC) issuing a permit permitting the use of City streets and/or City owned/public property for the conducting of an event to be held as reported above, hereby agrees to defend, hold harmless, and indemnify PCMC, its officers, agents, servants, employees, and their successors, from and against all claims, loss, or demands for damages, including claims for loss of life, personal injury or wrongful death and/or damage to property arising out of the conduct of said Special Event as defined by Title 4 of the Park City Municipal Code, and further agrees that Applicant is indemnifying and holding harmless PCMC irrespective of whether the scope or limits of Applicant's insurance policies adequately cover any of the aforementioned claims or demands.

maya levine / Ten off

Name of Applicant

Signature

Maya Levine

Name Printed

maya levine

Title

student

Applicant Address and Phone Number

STATE OF UTAH)
)ss.
COUNTY OF SUMMIT)

On this 5 day of March, 2019, before me, the undersigned notary, personally appeared Teri Orr, personally known to me/proved to me through identification documents allowed by law, to be the person whose name is signed on the preceding or attached document, and acknowledged that he/she signed it voluntarily for its stated purpose as applicant for March For Our Lives Event.

Susan Wynne
Notary Public



Dear Honorable Mayor Beerman and City Council,

March 12, 2018

On behalf of the Park City High School students, I ask for your consideration in waving all City permitting expenses associated with the March for Our Lives.

As students we do not have the funds necessary to allow the march to continue if the fees are not waived- however, we strongly feel that the message of this march is one that is talked about too little.

We ask that the City allow us to march in solidarity with our peers across America to ensure a safer environment for everyone going to school, a concert, or to work. By waiving these fees you allow us an opportunity to do so.

Thank you in advance for your consideration, time and understanding.

Sincerely,

Maya Levine and the Students of Park City High School