



# PARK USE EVENT APPLICATION

Application for all events held within the City of Idaho Falls Parks. Application required for events with one or more of the following: 100+ attendees, alcohol, events on Park property requesting street closure, and/or events with vendors.

**APPLICATION MUST BE SUBMITTED AT LEAST 45 DAYS PRIOR TO EVENT. APPLICATIONS RECEIVED LESS THAN 45 DAYS BEFORE EVENT WILL BE DENIED.**

## PERMIT STEPS

**1.) Submit this Park Use Event Application** to the Park's Special Event Coordinator:

[specialevents@idahofalls.gov](mailto:specialevents@idahofalls.gov) to reserve event date, time, and location. Spaces are reserved based upon date/time applications are received. Event dates/locations will not be reserved until completed application has been submitted.

**2.) Pay Fees.** Full payment and relevant documents are required 30 days prior to the event and must be submitted to Idaho Falls Parks and Recreation. Depending on the event size and scope, additional permits may be required by the City Clerk's Office and Fire Dept.

**3.) Provide Certificate of Insurance (if applicable).** It is the responsibility of the event organizer to maintain a Comprehensive Liability Insurance Policy meeting the necessary requirements on the City of Idaho Falls. The certificate must name the City of Idaho Falls as additional insured. For more information, contact the Special Event Coordinator: 208-612-8580 or [specialevents@idahofalls.gov](mailto:specialevents@idahofalls.gov)

**4.) Obtain necessary permits (where applicable):** Tents/Canopies, Fireworks, Alcohol, and/or Concessions/Vendors

## ORGANIZER INFORMATION

ORGANIZATION/INDIVIDUAL NAME: \_\_\_\_\_

INDIVIDUAL  PROFIT  NON-PROFIT  DISTRICT 91 EVENT  DISTRICT 93 EVENT

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EVENT ORGANIZER NAME: \_\_\_\_\_

ON-SITE CONTACT NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

## GENERAL INFORMATION

EVENT NAME: \_\_\_\_\_ EST. ATTENDANCE: \_\_\_\_\_

SETUP DATE: \_\_\_\_\_ EVENT DATE: \_\_\_\_\_ CLEANUP DATE: \_\_\_\_\_

BEGIN TIME: \_\_\_\_\_ BEGIN TIME: \_\_\_\_\_ BEGIN TIME: \_\_\_\_\_

END TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

EVENT DESCRIPTION & PURPOSE: \_\_\_\_\_

## FOR INTERNAL USE ONLY

<b>PARKS</b>	<b>INITIALS:</b> _____	<b>DATE:</b> _____
<b>POLICE</b>	<b>INITIALS:</b> _____	<b>DATE:</b> _____
<b>FIRE</b>	<b>INITIALS:</b> _____	<b>DATE:</b> _____
<b>PUBLIC WORKS</b>	<b>INITIALS:</b> _____	<b>DATE:</b> _____
<b>CITY CLERK</b>	<b>INITIALS:</b> _____	<b>DATE:</b> _____
<b>SPECIAL EVENT COORDINATOR</b>	<b>INITIALS:</b> _____	<b>DATE:</b> _____

## PARK LOCATION REQUEST

PARK LOCATION: reservable spaces include Shelters at Tautphaus, Freeman, Sunnyside, and Community Park, as well as areas along the River Walk, Civitan Plaza and Ice Arena. *For Sandy Downs, please fill out Sandy Downs Application*

**FREEMAN PARK:**

SHELTER:

- 1
- 2
- 3
- Bandshell

\_\_\_ Kate Curley  
\_\_\_ Civitan Park  
\_\_\_ Greenbelt Stage

**TAUTPHAUS PARK:**

SHELTER:

- 1
- 3
- Ice Arena
- Ice Arena Lobby

\_\_\_ Sunnyside  
\_\_\_ Civitan Plaza  
\_\_\_ Melaleuca Field  
\_\_\_ Ryder Park  
\_\_\_ Reinhart Park  
\_\_\_ Old Butte Field  
\_\_\_ OTHER: \_\_\_\_\_

**RIVERWALK CEMENT PAD:**

\_\_\_ Full Pad \_\_\_ Half Pad

- NORTH
- MIDDLE
- SOUTH

\_\_\_ South Capital Park  
\_\_\_ Highland Park  
\_\_\_ Community Park  
\_\_\_ Broadway Plaza

NO  YES **Requesting a shelter\* be reserved at one of the above locations?**

\*Note: not all of the above locations have available shelters, please check with staff for shelter availability

## ATHLETIC EVENT INFORMATION

NO  YES **Are you requesting to rent/reserve a field(s)/park for an athletic event?**

COMPLETE IF MARKED "YES" FOR ATHLETIC EVENT:

What type of event are you holding (check all that apply):

- |                     |                          |                   |                          |
|---------------------|--------------------------|-------------------|--------------------------|
| <b>LEAGUE EVENT</b> | <input type="checkbox"/> | <b>RACE EVENT</b> | <input type="checkbox"/> |
| <b>TOURNAMENT</b>   | <input type="checkbox"/> | <b>BICYCLE</b>    | <input type="checkbox"/> |
| <b>PRACTICE</b>     | <input type="checkbox"/> | <b>RUNNING</b>    | <input type="checkbox"/> |
| <b>CAMP</b>         | <input type="checkbox"/> | <b>OTHER</b>      | <input type="checkbox"/> |

Estimated # of Teams: \_\_\_\_\_ If OTHER fill in: \_\_\_\_\_

Estimated # of Participants: \_\_\_\_\_

- |  |                                  |  |
|--|----------------------------------|--|
| <input type="checkbox"/> NO <input type="checkbox"/> YES | Do you need field prep?          | If YES, please detail needs: _____   |
| <input type="checkbox"/> NO <input type="checkbox"/> YES | Baseball/Softball Field Chalked? | <input type="checkbox"/> NO <input type="checkbox"/> YES Field Lights (available at additional cost) |
| <input type="checkbox"/> NO <input type="checkbox"/> YES | Baseball/Softball Dragged        | <input type="checkbox"/> NO <input type="checkbox"/> YES Soccer/Football Field Painted               |

## REQUESTS FROM IDAHO FALLS PARKS AND RECREATION

Requests are subject to resource availability. Please consult with Special Event Coordinator

- |                               |  |  |
|-------------------------------|--|--|
| <b>ELECTRICITY</b>            | <input type="checkbox"/> NO <input type="checkbox"/> YES |  |
| <b>TRASH CANS*</b>            | <input type="checkbox"/> NO <input type="checkbox"/> YES | How Many? _____  |
| <b>DUMPSTER*</b>              | <input type="checkbox"/> NO <input type="checkbox"/> YES | <input type="checkbox"/> 3 YARD <input type="checkbox"/> 30 YARD |
| <b>BASES (for ballfields)</b> | <input type="checkbox"/> NO <input type="checkbox"/> YES |  |

\*available at additional cost please see pricing sheet and only available within City of Idaho Falls Park Property; prices are subject to change

## EVENT DETAILS REQUIRING ADDITIONAL PERMITS

NO  YES **VENDORS** (A vendor is an individual, sponsor, or group advertising, selling, or giving away services)

COMPLETE IF MARKED "YES" FOR VENDORS:

\$50 for the first ten (10) vendors and \$100 for more than 10 vendors

**# of Food Vendors:** \_\_\_\_\_

If food beverage products are being served, sold, or given away during an event, the organizer is responsible for verifying proper permits, including a food handling license or exemption certificate, and a current year mobile vending permit (if operating out of a trailer/truck).

**# of Non-Food Vendors:** \_\_\_\_\_

All vendors must follow policies set forth and stated on Special Event Use Policy, Park Rules, and City Codes. See Park Vendor Permit for details

**NO**     **YES**        **BEER/WINE** (Additional signage and perimeter requirements for serving or selling beer and/or wine)

COMPLETE IF MARKED "YES" **BEER/WINE:**

\$50 for the first ten (10) vendors and \$100 for more than 10 vendors

**SERVING** beer and/or wine (Beer/Wine Permit required from City Clerk, will also require security and ID Checkers)

**SELLING** beer and/or wine (Beer/Wine Permit required from City Clerk, will also require security and ID Checkers)

Beer/Wine sales are permitted only as local and state laws and policies allow and with the approval of the City of Idaho Falls City Clerk, the Special Event Coordinator, and Special Event Committee.

NAME OF CATERING COMPANY: \_\_\_\_\_

ON-SITE CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_

**Note:** This section must be completed by the event organizer, who will be responsible for the actions of the participants and who may be held liable for park damage, restoration, and/or cleanup costs. **The catering company is responsible for obtaining proper permit(s) from City Clerk's Office (208) 612-8415.**

**NO**     **YES**        **INFLATABLE STRUCTURE .**

**NOTE: Inflatables CANNOT be staked into the ground. Structures must be free standing and weighted. Inflatable structures requiring water are NOT allowed.**

NAME OF INFLATABLE PROVIDER: \_\_\_\_\_

**NO**     **YES**        **AMPLIFIED SOUND**

COMPLETE IF MARKED "YES" AMPLIFIED SOUND

Identify time and source of amplified sound (include sound check) START TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

PA System     Live Music     Other: \_\_\_\_\_

**Note:** Event organization/coordinator may be responsible for providing power to amplified sound source through a generator. Check facility for available/ample power before reserving.

### ITEMS PROVIDED BY EVENT ORGANIZER

Event Organizer is responsible for obtaining any items necessary for the event

PORTABLE TOILET ORDER     NO     YES        #REGULAR: \_\_\_\_\_ #ADA: \_\_\_\_\_

TRASH/RECYCLE ORDER     NO     YES        #TRASH: \_\_\_\_\_ #RECYCLE: \_\_\_\_\_

BARRICADES                     NO     YES        TYPE (bike rack, fencing, etc.): \_\_\_\_\_

GENERATORS                     NO     YES        QTY: \_\_\_\_\_

TABLES                             NO     YES        QTY: \_\_\_\_\_ SIZE: \_\_\_\_\_

STAGES                             NO     YES        QTY: \_\_\_\_\_ SIZE(S): \_\_\_\_\_

SETUP DATE & TIME: \_\_\_\_\_

TEARDOWN DATE & TIME: \_\_\_\_\_

TENTS                             NO     YES        QTY: \_\_\_\_\_ SIZE(S): \_\_\_\_\_

Larger than 400 sq ft?         NO     YES        SETUP DATE & TIME: \_\_\_\_\_

Larger than 400 sq. ft requires permit from IF Fire    TEARDOWN DATE & TIME: \_\_\_\_\_

STAFF WORKING                 NO     YES        #OF STAFF: \_\_\_\_\_ #OF VOLUNTEERS: \_\_\_\_\_

SECURITY HIRED                 NO     YES

NAME OF SECURITY COMPANY: \_\_\_\_\_ # OF STAFF: \_\_\_\_\_

ON-SITE CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_

SECURITY ROAMING             NO     YES

SECURITY STATIONED         NO     YES        WHERE? \_\_\_\_\_

FIREWORKS                     NO     YES        If yes, permit from City of Idaho Falls Fire Dept. required

NO  YES **STREET CLOSURE**

COMPLETE IF MARKED "YES" FOR STREET CLOSURE

STREET CLOSURE LOCATION (Provide Map WITH detailed road closure information): \_\_\_\_\_

ROAD CLOSE DATE: \_\_\_\_\_

ROAD CLOSE TIME: \_\_\_\_\_

ROAD OPEN TIME: \_\_\_\_\_

Closed section consists of approximately the following number of: \_\_\_

Attendees #: \_\_\_\_\_

Vehicles #: \_\_\_\_\_

Floats #: \_\_\_\_\_

Unlicensed Vehicles #: \_\_\_\_\_

Vendor Booths #: \_\_\_\_\_

Other: \_\_\_\_\_

**APPLICANT ASSURANCES FOR STREET CLOSURE**

We hereby agree to replace the premises satisfactorily to the Bonneville County Highway District at our own expense and hold said District and County and City and State harmless from all damages or expenses caused by or in connection with the use of said property or of restoring the same to its original condition.

Emergency access into the area shall be maintained at all times. A street closure does not include sidewalk areas; sidewalks MUST remain open and accessible. The area must be returned to a clean condition immediately upon conclusion of your event. Should you fail to perform adequate clean up or damage occurs to property or facilities, you may be billed accordingly.

I have read and understand the requirements and responsibilities set forth by this application.

Applicant Name (print): \_\_\_\_\_

Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

**Please note: ANY of the following may result in event organizer receiving future denial of events/ applications:**

**1.) Falsifying event application information**

**2.) Not following approved event plan**

**3.) Not having the approved street closure signage in place**

**4.) Failure to follow local, state and regional laws during setup/during event/post event clean up**

**5.) Failure to pay fees for event/application**

This document serves as an affidavit of the application's accuracy and agreement to abide by the policies governing the proposed Special Event under the City of Idaho Falls Ordinance.

**CHECKLIST TO BE COMPLETED BY EVENT ORGANIZER**

COMPLETED PARK USE APPLICATION

SITE MAP

PARK FEES

CERTIFICATE OF INSURANCE

VENDOR PERMITS (IF NECESSARY)

ALCOHOL PERMITS (IF NECESSARY)

FIREWORKS PERMIT

TENT/CANOPY PERMIT