

(Must be completed and submitted into the Norfolk Athletics Office)

Permitting process must be at 14 days prior to desired date of event. Application, full fee(s), certificate of liability insurance and security details must be submitted. Completion of this application does not guarantee approval of event, until permit is signed by city official. Recreation staff will contact individuals with approved permits.

Applicant Name: _____ **Date of Birth:** _____
Must be 18 years of age or older

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Name of Organization: _____ **Event Name:** _____
*If applicable *If applicable

Do you represent a non-profit organization with 501(c)3 status? Yes No
If applicable, please attach a copy of 501(c)3 certification and certificate of liability insurance for your organization.

Type of Event: Private **Use:** Birthday/Graduation Baby Shower/Gender Reveal Family Cookout
-OR-
Open **Use:** Reunion Organization Cookout
Duration: Full Day (8am-7pm) or Half Day (8am-1pm) or Half Day (2pm-7pm) **Estimated Total Attendance:** _____

Larger Sized Shelters			Smaller Sized Shelters		
Location(s)	Shelter No.	Occupancy (Max)	Location(s)	Shelter No.	Occupancy (Max)
Lafayette "City" Park	1, 2	100	Barraud Park	1, 2	50
Lakewood Park	1, 2, 3	100	Barraud Park	3	15
Northside Park	3, 4, 5	100	Lafayette "City" Park	3	15
Poplar Hall Park	1	100	Northside Park	2	50
			Northside Park	1	15

***Please Note Poplar Hall Park has no restrooms and reservation may require use of portable toilet(s). For ADA Accessible Locations please check with RPOS Staff.**

Shelter Requested Location: _____ **Shelter Number(s):** _____

Special Accommodations: Check Yes for all amenities that will be at event

	Check Box	Amount
Does your event include DJ/Band? (Must provide Generator for electricity)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Are you requesting permission to erect a tent? (Tents must be 10x10 and no stakes into ground)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Does your event include carnival games or bounce house? (Vendors must have COI on file)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Does your event include petting animals? (Vendors must have Animal Control Permit & COI on file)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Are you requesting permission to have food vendors? (Vendor must complete Vendors Application)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Does your event include mobile vendors Gaming/Food Trucks? (Must not obstruct traffic in parking lot)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Are you requesting permission to have portable toilet facilities? (Applicant's responsibility)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Does your event require additional trash cans? (Applicant's responsibility)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Vendors Information: List all vendors associated with your event. Staff will verify that all insurance information is on file and sufficient.

Vendor Name: _____ Contact Number: _____ Contact Email: _____
Vendor Name: _____ Contact Number: _____ Contact Email: _____
Vendor Name: _____ Contact Number: _____ Contact Email: _____

Describe Security to be Provided by Applicant: (Attach Formal Security Plan if deemed necessary).

Section Below is for Staff use Only

Application Fee: _____ Shelter Fee: _____ Change Fee: _____ **Total Balance Due:** _____

