

This application is a request only and does not guarantee a permit will be issued. To avoid any misunderstanding, please read the information provided in the Special Events Planning Guide.

Event Details

Date Requested	
Event Name	
Address of Event	
Organization Name	
Organization Phone	
Organization Fax	
E-Mail Address	
Set up Time:	
Event Start Time:	
Event End Time:	
Clean up Time:	
Expected Attendance	

Note: If the expected attendance is more than 1000 people you must prepare an event emergency plan. Town staff can assist you with this.

Facility Requested (Conditions of use for specific facilities must be followed)

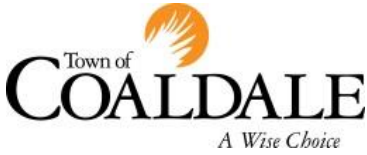
<input type="checkbox"/> Coaldale Arena	<input type="checkbox"/> the HUB
<input type="checkbox"/> Coaldale Curling Rink	<input type="checkbox"/> Sports fields/Quads
<input type="checkbox"/> Coaldale Kin Picnic Shelter	<input type="checkbox"/> Coaldale Community Centre
<input type="checkbox"/> Coaldale Outdoor Pool	<input type="checkbox"/> Coaldale Park

Coordinator/ Onsite Supervisor Contact Information

Name	
Street Address	
City	
Postal Code	
Event Day Phone	
E-Mail Address	

Event Description

Submit Application to: Town of Coaldale, Community Services Department
1306- 20 St, Coaldale AB, Phone: (403)345-1324 commserv@coaldale.ca



Check all that apply to your event

- | | |
|--|--|
| <input type="checkbox"/> Parade | <input type="checkbox"/> Concert/Performance |
| <input type="checkbox"/> Cycling | <input type="checkbox"/> Sporting Event Road |
| <input type="checkbox"/> Closure | <input type="checkbox"/> Private Event |
| <input type="checkbox"/> Demonstration | <input type="checkbox"/> Exhibit |
| <input type="checkbox"/> Ceremony | <input type="checkbox"/> Promotion |
| <input type="checkbox"/> Festival | <input type="checkbox"/> Indoor Event |
| | <input type="checkbox"/> Outdoor Event |

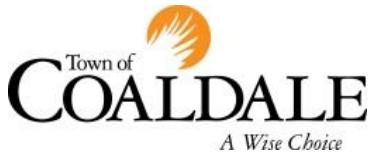
Equipment Requested

- | | |
|---|--|
| <input type="checkbox"/> # Barricades (\$100 Deposit) | <input type="checkbox"/> Electrical Access (may be subjected to fee) |
| <input type="checkbox"/> # Extra Garbage Cans | <input type="checkbox"/> Water Access (may be subjected to fee) |

_____ Drop off Date _____ Pick up Date _____ Pick up Time _____ Drop off Time

Weather Contingency Plans

- | | |
|---|-------------------------------------|
| <input type="checkbox"/> Go ahead with full event | <input type="checkbox"/> Cancel |
| <input type="checkbox"/> Go ahead with modified event | <input type="checkbox"/> Reschedule |
| <input type="checkbox"/> Alternate Location | |



Activities & Site Set Up

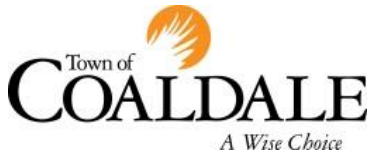
Will your event **include** any of the following?

Amplified Sound (Community Standards Bylaw 725-R-03-17)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Food Preparation (Alberta Health Services Special Events Package) http://www.albertahealthservices.ca/EnvironmentalHealth/wf-eh-special-events-organizer-package.pdf	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Food / Beverage Sales	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Merchandise Sales	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Portable Toilets	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Entertainment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Temporary Structures	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Tents	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Staging (Does the stage exceed two stories high?)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Inflatable (Activity Bouncer or Promotional Aid)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Dunk Tanks	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Petting Zoo or other similar types of activities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Beer Gardens (Alberta Liquor License Required)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fencing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Vehicle Access	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Street Closure	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Police Escort	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Flag Person to direct traffic	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Security	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other (describe)		

Other Requirements

Insurance Verification Attached (If applicable. See Special Events Planning Guide)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is Route Map Attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Site Plan Attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Event Promotion please visit https://sites.google.com/a/coaldale.ca/coaldale-community-calendar/		

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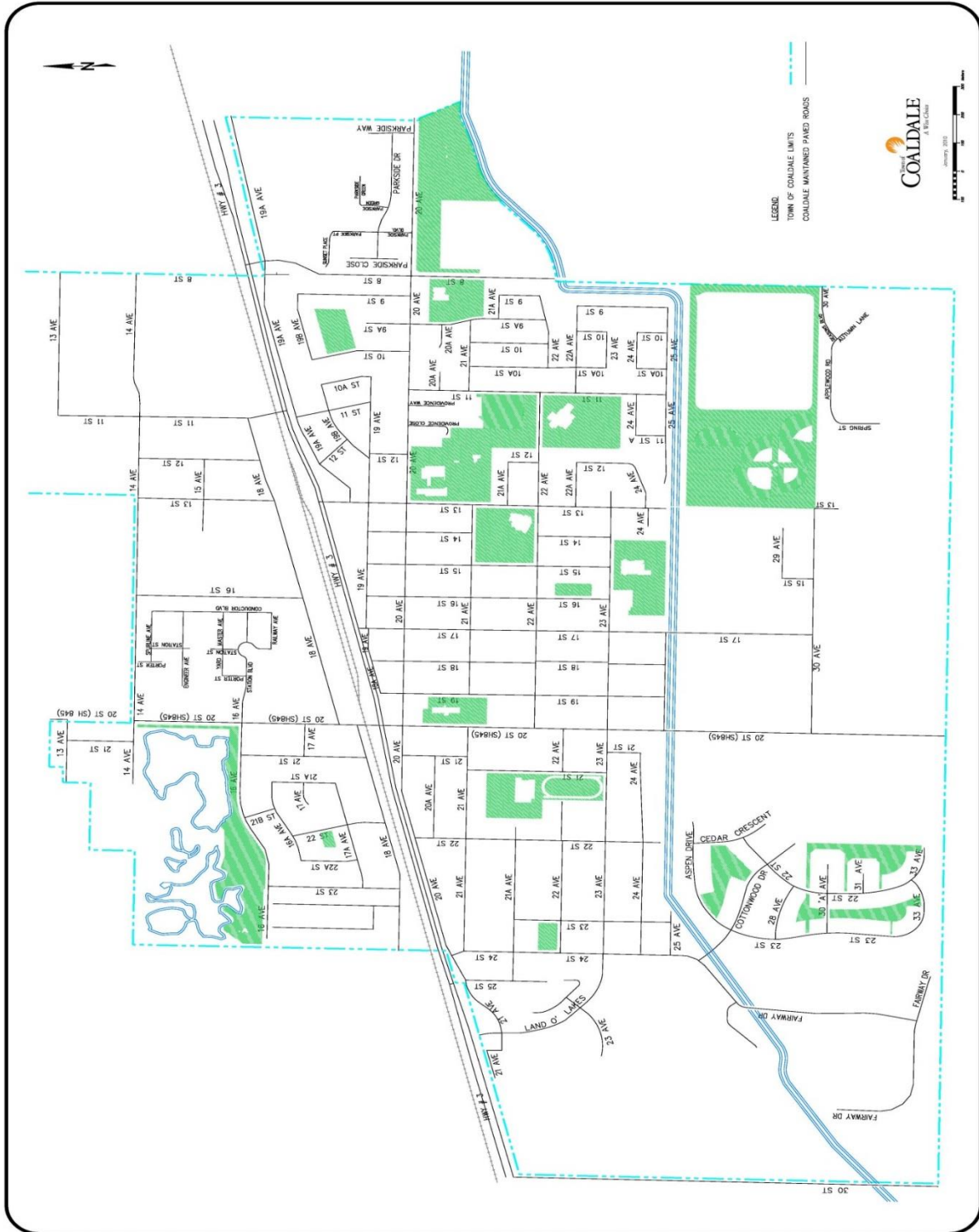


Community Services
Department

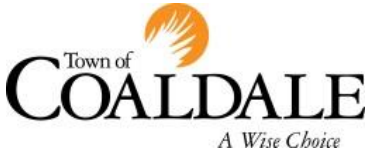
Special Events Application Form

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Map: Route Plan (please highlight your route)



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Map: Site Plan

This is an area for you to draw out how your event will be organized and where any stations, stages, tents, washrooms, hand washing stations, food, security and/or information booths will be.

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