UPPER MACUNGIE TOWNSHIP
Special Event Application

Special Event Description:

Event Title: _____

Event Date: First Choice _____ Second Choice _____

Event Location - Park Name/Specific Fields or Areas used:

_____

Event Description **(MUST ATTACH MAP WITH APPLICATION)**:

_____

Setup Start Date/Time: _____ Cleanup End Date/Time: _____

Actual Event Start and End Dates/Times: _____

List any items to be set up in advance (**INCLUDE DATES)**

_____

Estimated Participants: _____ Estimated Spectators: _____

Describe your parking plan **(specific parking lot letters if requesting Grange Park)**:

_____

Organization/Applicant Contact Information:

Organization Name (if applicable): _____

Point of Contact (ON-SITE DURING EVENT): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Cell Phone: _____

Email Address: _____

Yes **No** Are you selling merchandise?

Yes **No** Are vendors or other fees charged? Fee Amounts: $ _____

Yes **No** Are admission, entry, or participant fees charged? Fee Amounts: $ _____

Yes **No** Is this an annual event? If so, how many years have you been holding the event? _____

Yes **No** Are you a 501(c) certificate holder? IF YES: All fundraisers by and/or directly benefit a non-profit organization must submit proof of non-profit status with this application.

Alcohol:

Yes **No** Does your event involve the possession, consumption, or sale of alcoholic beverages?

Circle all that apply: Beer | Wine | Distilled Spirits | Alcohol Sales | Free Alcohol

NOTE: Events requesting alcohol must adhere to the requirements listed below and in the Security Section. These sections must be approved by UMTPD. All events with Alcohol must also be approved by the Board of Supervisors (BOS). BOS Meetings occur at the Township Building on the 1st Thursday of every month unless otherwise stated.

☐ **Bartender** (Names and Proof of RAMP Certifications): _____

☐ **Age verification method** (stamps, bracelets…etc.): _____

☐ **Event Insurance (alcohol liability coverage):** UMT must be named "Additional Insured."

- If you plan to sell or furnish alcoholic beverages at your event, you must receive authorization from the State of Pennsylvania Liquor Control Board (PLCB). Liquor Liability Coverage must be included on your Certificate of Insurance.

Security:

If you are having Alcohol, security is REQUIRED. The UMT Board of Supervisors (BOS) may require security for certain event types and sizes even if no alcohol is consumed. BOS Meetings occur at the Township Building on the 1st Thursday of every month unless otherwise stated.

☐ **N/A**

☐ **Detail Security Plan** (alcohol safety, general crowd control, name of company, etc.): _____

_____

_____

NOTE: Professional, uniformed and licensed security guards are required if an event has over 500 people attending, if crowd control may be an issue, if alcohol is being served, if public safety issues are expected, or if deemed necessary by the Upper Macungie Township Police Department. The Upper Macungie Police Department must review private security companies used for events. UMTPD Officers may be contacted for security requests sixty (60) days prior to your event for scheduling purposes (4 hour minimum). UMPTD Fees are available on the Township Fee schedule or by contacting UMTPD directly.

Tents:

Yes **No** Are you using tents? What size tents? _____

NOTE: If you will have tents, you MUST indicate the exact location on your attached map. Tents over 400sq ft. will require an additional permit. Tents may not be staked down without completing a PA-1 Call and submitting a copy of the response to the UMT Public Works Dept. Dial 811 or 1-800-242-1776.

COMPLETION/SUBMISSION OF THIS APPLICATION DOES NOT APPROVE YOUR EVENT.

Medical Plan:

NOTE: UMT staff and/or Board of Supervisors may require a medical service plan upon review of application. Events over 500 people should include a First Aid Station with a CPR/First Aid Certified individual. The first aid station MUST be labeled on your event map. Events over 2000 people will require trained medical professionals on site for the safety of all participants. We recommend that you contact Cetronia EMS at least 90 days prior to your event for scheduling purposes.

Yes **No** We will have a first aid station will be at our event.

Yes **No** First aid station to be staffed by event staff who are first aid/CPR certified.

Yes **No** First aid station to be staffed by professionals. Company Name: _____

Electricity & Amplified Sound:

Yes **No** Will sound amplification equipment or system be used at the event?

If yes, please describe: _____

Amplified Sound will be used: **Start Time:** _____ **End Time:** _____

NOTE: You must supply your own power source, i.e. a generator. Electrical outlets are limited in number and location, and not guaranteed to be operational.

Food, Drink, & Entertainment Vendors:

Yes **No** Does your event include food, beverage, or entertainment vendors?

If yes, please describe the number and type of food/beverage/entertainment:

_____

If your event involves food/beverage vendors, please describe how the products will be prepared:

_____

By signing below, I certify and agree to the following: The Event Organizer is responsible for ensuring that vendors have the proper insurance, and licensing. The Event Organizer is solely responsible and liable for all participating vendors.

_____ _____

Signature Date

COMPLETION/SUBMISSION OF THIS APPLICATION DOES NOT APPROVE YOUR EVENT.

Trash and Recycling:

Permanent onsite receptacles are NOT intended for events over 1000 patrons. **For events over 1000 patrons, Event Organizers MUST provide at least one trash dumpster, and a recycling dumpster may also be required if cardboard and other recyclables generated from food and beverage are a large part of your event.**

NOTE: Trash must be removed from the property and disposed of by the event organizer immediately after the event. Failure to properly dispose of trash and/or recycling after an event will be subject to fines. A cleaning crew, staffed with your organization's personnel or volunteers, is required to clean during and at the end of each day of an event. Bottles, Cans, Paper and Cardboard must be recycled. As an event organizer, you must ensure the proper disposal of waste and garbage throughout the term of your event, and immediately upon conclusion of the event, the area must be returned to a clean condition. If you, as an event organizer, set a standard of leaving the venue as clean as you found it, you can have a highly beneficial impact on the Upper Macungie Township community. If it is determined by Township staff that there is past history of poor cleanup, your event may not be approved in future years.

By signing below, I understand that the Township does NOT provide trash or recycling removal from events and that the applicant is responsible for providing proper trash and recycling receptacles and for removal of all trash during and after the event and that failure to adhere to the rules set by Upper Macungie Township may result in fines or denied approval for future events within the Township.

Signature Date

Portable Restrooms:

Yes **No** Are you arranging for portable restrooms?

Drop Off: Date: Time: **Pick-Up:** Date: Time:

NOTE: Portable restrooms may be required based on event size and location. Park restrooms are CLOSED from November 1st through April 1st. If portable restrooms are required, you must provide at least two portable toilets for every 500 people attending the event. For events with alcohol, you must provide four portable toilets for every 500 people attending the event. Federal guidelines require that five (5%) of these facilities must be ADA accessible. *PREFERRED VENDOR: UMT recommends reaching out to Call of Nature for all portable restroom needs. Email con8951@ptd.net or call 610-298-3202 to book with them.*

Signage:

By signing below, I understand that all organizational and event signage must be reviewed and approved by Upper Macungie Township staff and that failure to get prior approval of signage, the use of signage deemed inappropriate, or signage placed in spots deemed hazardous to vehicle and pedestrian safety may result in a fine or penalty.

Signature Date

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IMPORTANT INFORMATION:

Please read through all Upper Macungie Township rules and regulations. Type your initials in the space provided to certify that you agree to each policy.

_____ Upper Macungie Township reserves the right to deny special event applications that are incomplete, received less than 90 days prior to requested event date lacking the time for proper planning and communication, or outside of the realm of what is deemed appropriate.

_____ Submitting payment prior to approval is in no way to be construed as approval of your event.

_____ UMT Park Rules must be read and followed by applicants. By submitting this application, you are agreeing to read and follow all rules, policies, and requirements made available.

_____ Cancellation Policy: **Refund request made 30 days or more prior to event:** 10% administrative fee held | **15 - 29 days prior to event:** 50% refunded | **Less than 15 days prior to event**: 0% refunded

_____ Refunds will NOT be issued due to inclement weather.

_____ The use of all fields, amenities, or open space may require a refundable Security Deposit

_____ UMT reserves the right to charge additional fees for events with change in requested use, and for set-up or tear-down time outside of the day(s) of the event.

_____ UMT reserves the right to charge Fees/Penalties for damage and clean-up including damage/destruction of grass, fields or pathways, property; clean-up after an event (including street sweeping), will be billed to the event organizer as the cost of equipment, material & labor for township staff and/or a contracted service to complete the work. Fees/Penalties will be deducted from applicant security deposit, if applicable.

DAY OF YOUR EVENT- call 610-395-4892 if you need township assistance. Our after-hours service will relay your message to staff. Call 610-437-5252 to reach the Lehigh County non-emergency dispatch office. Call 911 for any emergencies

COMPLETION/SUBMISSION OF THIS APPLICATION DOES NOT APPROVE YOUR EVENT.

Affidavit of Application:

I hereby certify the foregoing statements to be true and assigns correct and agree to indemnify, defend, and hold harmless Upper Macungie Township, its elected officials, officers, appointees employees, agents, independent contractors, or assigns, as additional insured's from and against any and all loses, damages, liability, claims, suits, costs and expenses whatsoever, including attorney's fees, regardless of the merit or outcome of any such claim or suit arising from or in any manner connected to the requested activity. In the event that a possessory interest subject to property taxation is create by virtue of this use permit, I agree to pay all possessory interest taxes and Upper Macungie Township shall not be liable for the payment of such taxes I further agree that the payment of any such taxes shall not reduce any consideration paid Upper Macungie Township pursuant to this use permit. I agree to abide by these rules, and further certify that I, on behalf of the organization, am also authorized to commit that organization to, and therefore agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the event to Upper Macungie Township. I also agree, if approved, to comply with all permit conditions, including those listed in Parks Rules and other policy/rule documents provided by the Township website and representatives and understand that failure to comply with any condition or any violation of law may result in the immediate cancellation of the event, denial of future events and/or criminal prosecution.

Organization (if applicable) _____

Point of Contact (event organizer) _____

Signature _____

Upper Macungie Township Contact Information

Please contact the appropriate Department for further information. Please keep in mind your application should be received 90 days prior to your event for proper planning.

UMT Staff Member	Department & Phone Number
Ryan Griffiths (Recreation Manager)	Recreation Department 610-395-4892 x156
Emily Crosby-Piszczek (Recreation Supervisor)	Recreation Department 610-395-4892 x130

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