

SECRET CITY FESTIVAL OFFICIAL EVENT APPLICATION
June 20 & 21, 2008

Event Name _____
(Please list the official event title)

Organization _____ Profit Non-profit

Contact _____

Address _____
City State Zip

Phone _____ E-mail _____

Fax _____ Alternate Contact _____

Address _____ Phone _____

Website _____

Description of Activity _____

Plans to tie into Secret City Festival theme _____

Goal of the event _____

Date _____ Time _____ Rain Date _____

Planned Location _____

Will a fee be charged? Yes No If yes, how much & how will the proceeds be used? _____

All event sponsors are responsible for their own insurance

Will concessions be sold? _____ Event Insured by: _____

Amount of Insurance: _____

Special arrangements? _____

LIABILITY STATEMENT

The organization and participants of the above event hereby agree to indemnify and hold forever harmless the City of Oak Ridge, Oak Ridge Convention and Visitors Bureau, and the Arts Council of Oak Ridge on behalf of any party, for the purpose of enforcing a claim for damages on account of any injuries, demands, damages, or claims of any nature, including property damage, sustained or arising in consequence of any accident or injury, demands, damages, or claims of any nature, arising from the event.

Signature of Event Chairperson

Date

The mission of the Secret City Festival is to become a premier event in East Tennessee while fostering pride and involvement in the Oak Ridge community by showcasing its diversity through cultural events and activities for people of all ages. The festival promotes the history of the city and unites its World War II heritage with the technological advancements that are ongoing within the City of Oak Ridge.

SECRET CITY FESTIVAL
Attention: Jane Gibson
Oak Ridge Recreation & Parks Department
Post Office Box 1 - Oak Ridge, TN 37831-0001
Festival Line: (865) 425-3610 * FAX: (865) 425-3418

DEADLINE TO BE INCLUDED IN PUBLICITY - April 4, 2008

REQUEST FOR USE OF CITY FACILITIES, EQUIPMENT, AND/OR SPECIAL ARRANGEMENTS FOR SECRET CITY FESTIVAL

If you are requesting use of City facilities, equipment, or wish to make special arrangements, please fill out the request form (be specific). This is only a request. The proper City forms, permits, and licenses must be completed and approved to use these facilities.

FACILITY:	ROOM (S)
<input type="checkbox"/> Civic Center	_____

<input type="checkbox"/> Indoor Pool	_____

PARKS: _____

FIELDS: _____

PARKING LOT: _____

OTHER: _____

Please indicate below all equipment requested for your event. Your group is responsible for checking equipment in and out, setups, damaged equipment, etc. Please specify below how many of each item you will need. **Remember, this is only a request.**

_____ Chairs	_____ Tables	_____ (size)	_____ Stopwatches
_____ Voice Gun	_____ Radios		_____ Traffic Cones
_____ Podium	_____ P.A.		_____ Trash Cans
_____ Bleachers	_____ Other		_____ Barricades
_____ Additional Staffing			_____ Picnic Tables

YOU WILL BE CONTACTED TO COMPLETE THE PROPER PAPERWORK ON THOSE REQUESTS THAT CAN BE ACCOMMODATED

Alcohol/Beer Yes <input type="checkbox"/> No <input type="checkbox"/>	Event Banner Yes <input type="checkbox"/> No <input type="checkbox"/>
Street Closure Yes <input type="checkbox"/> No <input type="checkbox"/>	Electric Usage Yes <input type="checkbox"/> No <input type="checkbox"/>