

Dear Event Producer:

Thank you for choosing to host your event with Coconino County Parks & Recreation. Please read the following information very carefully and supply answers to all required questions. Submitting this application does not guarantee dates or use of facility. Full Payment will be required after a contract is issued. **The only payment due with the application is the \$25 application fee.** Do not submit deposit, rental, and service payment with your application.

Special Event Applications are processed in the order received. Preference is given to organizations that are in "Good Standing" (see [Special Events Rules and Procedures](#) document) and are an established annual event.

Applications must be submitted by the deadline according to the Event Tier and will not be reviewed after that deadline. See [Special Events Rules and Procedures](#) document for more information on Event Levels.

- Level 1 – The application must be received at least *60 days* prior to the first day of the Use Period.
- Level 2 – The application must be received at least *45 days* prior to the first day of the Use Period.
- Level 3 – The application must be received at least *15 days* prior to the first day of the Use Period.

Application Packet Checklist – **ALL ITEMS ARE REQUIRED.** If any portion of the application is incomplete the proposed event **WILL NOT** be considered until a complete application is submitted.

- Special Event Application
- \$25 Application Fee – Checks payable to 'Coconino County Parks & Recreation'
- DRAFT Event Site Plan – An illustrative, detailed, and descriptive map of the event area, showing the locations of all items addressed in the Special Event Application. The site plan can (and likely will) change as the event gets closer.

[Special Event Rules and Procedures](#), [All Park Rules and Policies](#), the [Special Event Fee Schedule](#), and other Special Event information is available at [coconino.az.gov/parkevents](http://coconino.az.gov/parkevents).

Please e-mail [events@coconino.az.gov](mailto:events@coconino.az.gov) or call (928) 679 8000 with any questions regarding Special Event Facility Rentals.

Sincerely,

Coconino County Parks & Recreation

# SPECIAL EVENT APPLICATION

## LOUISE YELLOWMAN COUNTY PARK

### Event Management Representative Information

Representative must be an employee, board member, or authorized with a letter on entity letterhead signed by an authorized employee or board member at the time of application. Applications will not be accepted without this authorization.

**The representative will be the only individual receiving communication from the Special Events Coordinator until the entity provides a letter stating a change.**

| <i>Items marked with an asterisk (*) are required</i>   |             |  |   |
|---|-------------|--|---|
| First Name*   |             | Last Name*   |   |
| Street Address*   |             | Apartment/Unit Number  | City & State*   |
| Home Phone*   | Cell Phone* | Do you agree to receive Text Message Alerts?*                    | Cell Phone Service Provider (For Text Message Alerts) |
|   |             | <input type="radio"/> Yes <input type="radio"/> No               |   |
| E-mail Address*   |             | Do you agree to receive promotional e-mails?*                    | Gender/Preferred Pronouns*                            |
|   |             | <input type="radio"/> Yes <input type="radio"/> No               |   |
| May we contact you regarding opportunities to volunteer?*   |             | How did you hear about us? (Flyer, Website, Word of Mouth, etc.) |   |
| <input type="radio"/> Yes <input type="radio"/> No  |             |  |   |
| Would You Like Your Event to be Included on Our Online Calendar of Events, located at <a href="http://coconino.az.gov/parks?*" style="color: blue; text-decoration: underline;">coconino.az.gov/parks?*</a> |             | If Yes, Please Fill Out the Following:                           |   |
| <input type="radio"/> Yes   |             | Public Contact Name: _____                                       |   |
| <input type="radio"/> No  |             | Public Phone Number: _____                                       |   |
|   |             | Event/Company Website: _____                                     |   |

### Organization Information (if applicable)

| <i>Items marked with an asterisk (*) are required if renting as part of an organization</i> |                  |                      |                              |
|---|------------------|----------------------|------------------------------|
| Organization Name*  |                  |                      |                              |
| Organization Address*   |                  | Unit Number          | City & State*                |
|   |                  |                      | Zip Code*                    |
| Organization Phone Number*  | Additional Phone | Tax ID Number*       | Event Website (If Different) |
| Type of Organization*   |                  | Organization Website |                              |
| <input type="radio"/> Commercial  |                  |                      |                              |
| <input type="radio"/> Non-Profit**  |                  |                      |                              |

\*\*A copy of your non-profit status is required to receive non-profit pricing.

**General Event Information (All Fields REQUIRED – put N/A if Not Applicable)**

|  |   |
|--|---|
| Event Name (i.e., Coconino County Fair)  | Estimated Attendance (Include participants, attendees, vendors, staff, etc. for <b>duration of event</b> )  |
| Anticipated <b>Peak</b> Event Attendance<br><br>Day: _____<br>Time: _____<br>Total Attendance: _____   | Attendance/Registration Cap (If applicable, please state your cap and how you will communicate that to attendees.)  |
| Move-In Date(s)  | Move-In Time(s)   |
| Event Date(s)  | Event Time(s)   |
| Move-Out Date(s)   | Move-Out Time(s)  |
| Who is Coming to Your Event?<br><br><input type="radio"/> Private (Invite Only)<br><input type="radio"/> Open to Public  | Type of Event (Check All That Apply)<br><br><input type="checkbox"/> Bicycle Event<br><input type="checkbox"/> Company Picnic/Event<br><input type="checkbox"/> Concert<br><input type="checkbox"/> Family/Private Gathering<br><input type="checkbox"/> Festival<br><input type="checkbox"/> Livestock Show<br><input type="checkbox"/> Merchandise/Service Sale<br><input type="checkbox"/> Skate Competition<br><input type="checkbox"/> Walk/Run Event<br><input type="checkbox"/> Wedding/Reception<br><input type="checkbox"/> Other, Enter Below<br>_____<br>_____ |
| Is This Event New or Returning to Fort Tuthill County Park?<br><br><input type="radio"/> New<br><input type="radio"/> Returning<br><br>In What Year Was this Event Last Hosted at Fort Tuthill County Park?<br><br>_____ |   |
| Have you held this event elsewhere before? If so, where and when?<br><br><input type="radio"/> Yes<br>Where: _____<br>When: _____<br><br><input type="radio"/> No  |   |
| Describe Your Event in Detail. Use an Extra Sheet of Paper as Needed.  |   |

## General Event Information Continued

Select, Describe, and Provide an *Estimated* Quantity for **All Event Fees** That Apply. Use an additional sheet of paper if there is not enough room below.

Admission

Charge Description: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ EST QTY: \_\_\_\_\_

Charge Description: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ EST QTY: \_\_\_\_\_

Charge Description: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ EST QTY: \_\_\_\_\_

Registration/Participation

Charge Description: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ EST QTY: \_\_\_\_\_

Charge Description: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ EST QTY: \_\_\_\_\_

Parking

Charge Description: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ EST QTY: \_\_\_\_\_

Charge Description: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ EST QTY: \_\_\_\_\_

Will There be **Amplified Sound**?

- Yes  
 No

Description of **Amplified Sound** (Include time for sound check and performances, scope and scale, power & space needs, etc.)

Will the Event Include **Vendors Selling Merchandise and/or Services**?

- Yes  
 No

QTY: \_\_\_\_\_

Describe Your Plan for Coordinating **Vendors** for **Set-Up, Tear-Down, Unloading, Parking**, etc.

Will the Event Include **Vendors Selling Food**?

- Yes  
 No

Will You **Give Away** Food at Your Event?

- Yes  
 No

What **Kind of Food** Will You Have?

- Food Trucks QTY: \_\_\_\_\_  
 Other Food Stands QTY: \_\_\_\_\_  
 Catering Company: \_\_\_\_\_

Coconino County Health & Human Services requires the Event Producer to fill out a 'Temporary Event Coordinator Application'. See <https://www.coconino.az.gov/522/Informational-Packets-Applications> for more information.

Will Vendors Need Utilities?

- Yes  
 No

**How Many Vendors Need Utilities? Please note that utilities are limited at this park.**

QTY 110v/20 Amp: \_\_\_\_\_ QTY 220v/50 Amp: \_\_\_\_\_  
 QTY Water: \_\_\_\_\_ QTY Grey Water: \_\_\_\_\_

Describe Your Plan for Containing and Disposing of Grease, Oils, Ashes, and Other Food Waste.

Will There Be Alcohol Consumption? **Glass Containers Are Not Permitted in Any Coconino County Park.**

Base General Liability Insurance coverage that names Coconino County as additional insured (as described in the Rules & Procedures) is required for all events.

Yes, event will serve alcohol at **no cost** and is **free to attend.**

(No additional license or coverage is required as long as *no payment or tips are exchanged.*)

Yes, attendees will **provide their own** alcohol.

(No additional license or coverage is required)

Yes, event will serve alcohol at **no cost** but there will be a **fee to attend.**

(Retail liquor liability insurance coverage with endorsement of Coconino County as additional insured is *required* if there is an event fee to enter or participate.)

Yes, event will **sell** alcohol.

(Event Producer must obtain Series 15 Liquor License and provide retail liquor liability insurance coverage with endorsement of Coconino County as additional insured.)

No, alcohol will not be consumed.

Describe Your **Plan for Coordinating Alcohol Sales or Distribution** During Your Event. Include How Event Attendees of Legal Drinking Age (21 Years or Older) will be Identified.

### Logistical Information (All Fields **REQUIRED**)

Will You be Using **Pop-Up Tents**?

Yes

No

QTY: \_\_\_\_\_

Sizes: \_\_\_\_\_

If Yes, are You **Renting the Tents**?

Yes

No

Company: \_\_\_\_\_

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

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

Will You be Using **Inflatables/Rock Walls/Interactive Equipment**?

Yes

No

Company: \_\_\_\_\_

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

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

Will You be Using **Live Animal Exhibits (e.g., a petting zoo, livestock show, etc.)**? Note that Live Animal Exhibits are permitted only in specific facilities. Inquire with Events Coordinator.

Yes

No

Company: \_\_\_\_\_

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

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

Describe Your Plan for **Ensuring Tents, Inflatables/Rock Walls/Interactive Equipment, etc. are Anchored Appropriately (Staking is NOT Permitted in Our Park System).**

|   |  |   |
|---|--|---|
| <p>Will You be Using <b>Portable Restrooms and/or Hand Washing Stations</b>?</p> <p><input type="radio"/> Yes<br/><input type="radio"/> No</p> <p>QTY ADA: _____ QTY Standard: _____<br/>QTY Hand Wash: _____</p> <p>Company: _____<br/>Delivery Date: _____<br/>Removal Date: _____<br/>Servicing Schedule: _____</p>  | <p>Will You be Using <b>Trash and/or Recycling Dumpsters</b>?</p> <p><input type="radio"/> Yes<br/><input type="radio"/> No, I will pack my trash out after the event.</p> <p>QTY Trash Dumpster: _____ SIZE: _____<br/>QTY Recycling Dumpster: _____ SIZE: _____</p> <p>Company: _____<br/>Delivery Date: _____<br/>Removal Date: _____</p> |   |
| <p>Describe Your Plan for <b>Trash Collection During Your Event &amp; Removal from the Premises</b>. How Will You Address Nearby Areas Impacted by Your Event?</p><br><br><br>  |  |   |
| <p>A <b>Traffic Control Plan</b> is mandatory for any event altering the flow of traffic in and around the park and may be required for events of 500 or more attendees. Will you alter the flow of traffic and/or have over 500 attendees?</p> <p><input type="radio"/> Yes (Please supply a map with additional information. A Traffic Control Plan may be required. Events Coordinator will advise.)<br/><input type="radio"/> No</p> <p>Company: _____<br/>Delivery Date &amp; Time: _____<br/>Removal Date &amp; Time: _____</p> | <p>What is Your Plan for <b>Attendee Parking</b>?</p><br><br><br>  | <p>What is Your Plan for <b>Other (vendors, staff, volunteers, etc.) Parking</b>?</p><br><br><br> |
| <p>Will You be Using <b>Off-Duty Law Enforcement Officers</b>?</p> <p><input type="radio"/> Yes<br/><input type="radio"/> No</p> <p>QTY: _____<br/>Company: _____<br/>Purpose: _____<br/>Start Date &amp; Time: _____<br/>End Date &amp; Time: _____</p>  | <p>Will You Be Using <b>Private Security</b>?</p> <p><input type="radio"/> Yes<br/><input type="radio"/> No</p> <p>QTY: _____<br/>Company: _____<br/>Purpose: _____<br/>Start Date &amp; Time: _____<br/>End Date &amp; Time: _____</p>  |   |

|   |   |
|---|---|
| Please provide us with your <b>Medical Plan</b> below or on another sheet of paper. Your plan should include, but not be limited to: <ul style="list-style-type: none"> <li>• A map of the event with locations of first aid stations and other staging locations</li> <li>• Communications plan for emergencies</li> <li>• The number of first aid and/or CPR certified staff that will be onsite and when</li> <li>• The schedule of ambulance standby</li> </ul> See the <b>Special Events Rules and Procedures</b> document for more information. | Do you Plan to Use <b>Signage and/or Banners</b> for Your Event?<br><input type="radio"/> Yes<br><input type="radio"/> No |
|   | What is Your Plan for <b>Signage/Banner Placement</b> ? Include Locations and Dates on Event Site Plan.                   |

### Facility Use Information – Check All Facilities You’d Like to Utilize

| Facility & Description   | Daily Rental Fee For-Profit Organizations | Daily Rental Fee Non-Profit Organizations |
|--|---|---|
| <b>Event Centers</b><br>Requests for Event Center use is dependent on CCPR Director approval.<br><b>Access to private operations and park amenities, such as playgrounds must remain open to the public.</b>   |   |   |
| <input type="checkbox"/> <b>Louise Yellowman County Park</b><br>Includes Group Pavilion, Basketball Court, Skate Park, and access to restrooms. Walkways, playground, and restrooms shall remain open to the public. Parking lot is to be used for parking and not an event activity area. | \$453.00                                  | \$340.00                                  |

| Facility & Description   | Rental Fee For-Profit Organizations              | Rental Fee Non-Profit Organizations             |
|--|--|---|
| <b>Courts &amp; Skate Park</b><br>All buildings include 1 trash barrel with 1 liner and use of parking lots for parking purposes. Additional barrels & liners are available to rent. |  |   |
| <input type="checkbox"/> <b>Basketball Court</b><br>There is a \$250 deposit for this facility.  | \$10.00 / hour Weekday<br>\$15.00 / hour Weekend | \$7.50 / hour Weekday<br>\$11.25 / hour Weekend |
| <input type="checkbox"/> <b>Skate Park</b><br>Includes trash barrel with 1 liner and access to restrooms. There is a \$100 deposit for this facility.                                | \$165.00 / day                                   | \$112.50 / day                                  |

| Facility & Description  | Weekday Rental | Primetime/Holiday Rental |
|---|----------------|--------------------------|
| Ramada rental may be required if event footprint inhibits the rental of the ramada to another party.<br>Ramadas used for Special Events are charged a \$100 deposit for each ramada.  |                |                          |
| <input type="checkbox"/> <b>Group Pavilion</b><br>Capacity of 125 people. Includes 4 picnic tables, 4 charcoal grills, electricity, and access to restrooms and a playground. There is a large, open area (no grass) around the pavilion. | \$76.00        | \$114.00                 |

## Additional Special Event Fees, Equipment, & Services

| Equipment, Service, and/or Fee   | Fee  | Unit                           |
|--|--|--------------------------------|
| <b>Check All That Apply &amp; Include Quantity as Applicable</b>   |  |                                |
| <small>Equipment includes delivery and removal. Staff will stage equipment in agreed-upon area – they will <b>not</b> set up for your event.</small>                   |  |                                |
| <input checked="" type="checkbox"/> <b>Special Event Application Fee (Required)</b><br><small>Non-refundable fee charged per Special Event Application.</small>        | \$25.00  | Per Application                |
| <input type="checkbox"/> <b>Use Impact Fee</b><br><small>Paid at end of event. Required for any event charging admission, entry, parking or registration fees.</small> | \$0.50 if fee is \$10.00 or less<br>\$1.00 if fee is \$11.00 or more | Per Person Per Fee             |
| <input type="checkbox"/> <b>Alcohol Beverage Sales</b><br><small>Must obtain Series 15 Special Event Liquor License</small>  | 30% of <b>Gross Sales</b>  | Per Event                      |
| <input type="checkbox"/> <b>Vendor Permit w/ Utilities</b> QTY: _____<br><small>Utilities include 110v/20 amp access and water hook-ups.</small>                       | \$25.00  | Per 3-Day Period               |
| <input type="checkbox"/> <b>Vendor Permit w/o Utilities</b> QTY: _____   | \$15.00  | Per 3-Day Period               |
| <input type="checkbox"/> <b>Group Vendor Permit w/ Utilities</b><br><small>Utilities include 110v/20 amp access and water hook-ups.</small>                            | \$220.00   | Per 3-Day Period               |
| <input type="checkbox"/> <b>Folding Chair</b> QTY: _____<br><small>195 chairs available</small>  | \$2.00   | Per Chair Per 3-Day Period     |
| <input type="checkbox"/> <b>Folding Table</b> QTY: _____<br><small>15 - 8', 5 - 6', &amp; 25 - 60" round available</small>   | \$10.00  | Per Table Per 3-Day Period     |
| <input type="checkbox"/> <b>Trash Can Liner Case</b> QTY: _____<br><small>100 liners per case.</small>   | \$60.00  | Per Case                       |
| <input type="checkbox"/> <b>Spider Box</b> QTY: _____<br><small>230 Volt w/ six 110v outlets.</small>  | \$18.00  | Per Spider Box Per Day         |
| <input type="checkbox"/> <b>50' Electrical Cord</b> QTY: _____   | \$12.00  | Per Cord Per Day               |
| <input type="checkbox"/> <b>100' Electrical Cord</b> QTY: _____  | \$25.00  | Per Cord Per Day               |
| <input type="checkbox"/> <b>3' Electrical Cord Ramp</b> QTY: _____   | \$8.00   | Per Ramp Per Day               |
| <input type="checkbox"/> <b>Smoking Genie</b> QTY: _____   | \$7.00   | Per Genie Per 3-Day Period     |
| <input type="checkbox"/> <b>PA System</b><br><small>Includes set-up.</small>   | \$25.00  | Per Day                        |
| <input type="checkbox"/> <b>Equipment or Trailer Storage w/ Electric</b><br><small>Based on availability. 110v/20 amp access.</small>                                  | \$16.00  | Per Item Per Day               |
| <input type="checkbox"/> <b>Equipment or Trailer Storage w/o Electric</b><br><small>Based on availability.</small>   | \$13.00  | Per Item Per Day               |
| <input type="checkbox"/> <b>Staff Assistance Between 7 AM – 4 PM</b><br><small>Minimum of 30 minutes, based on availability</small>                                    | \$25.00  | Per Staff Per 30 Minute Period |
| <input type="checkbox"/> <b>Staff Assistance Outside 7 AM – 4 PM</b><br><small>Minimum of 30 minutes, based on availability</small>                                    | \$50.00  | Per Staff Per 30 Minute Period |
| <input type="checkbox"/> <b>Post-Event Clean Up Fee</b><br><small>Minimum of 30 minutes, based on availability</small>   | \$37.50  | Per Staff Per 30 Minute Period |
| <input type="checkbox"/> <b>Camping in Parking Lot</b><br><small>Based on availability in advance of event.</small>  | \$16.00  | Per Vehicle Per Day            |



Certification of Information

I have read, understand, and, if approved, will comply with the **Special Event Rules & Procedures** and **All Park Rules & Policies**, available at [coconino.az.gov/parkevents](http://coconino.az.gov/parkevents) and in print upon request.

I understand that I must be able to provide the Events Coordinator with a **Certificate of Insurance that names Coconino County as additional insured for general liability** and has at least the minimum coverage of **One Million Dollars (\$1,000,000) per occurrence/Two Million Dollars (\$2,000,000) aggregate**. Coconino County reserves the right to require other insurance and/or higher limits, dependent upon the nature of the event.

I hereby certify that the statements made in this application are true and complete to the best of my knowledge. I understand that intentional omissions or falsification of information is sufficient grounds for denial of the application and subsequent revocation of the permit.

By signing this application, I acknowledge that my event has NOT been approved by Coconino County Parks & Recreation. The Coconino County Events Coordinator will reach out to continue the special events process.

Event Producer Name: \_\_\_\_\_

Event Producer Signature: \_\_\_\_\_

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