



# SPRINGFIELD POLICE DEPARTMENT

## SPECIAL EVENT APPLICATION



All Special Event applications must be submitted to the Springfield Police Department a minimum of **30 days** before the desired event date. All parades or races shall be held on weekends or holidays, during daylight hours only. (Municipal Code: Section 78-384 and 78-387)

**Mail Completed Special Event applications to:**

Special Events Coordinator, Springfield Police Department, 321 E. Chestnut Expressway, Springfield, MO 65802-3803

| SPONSOR OF EVENT      |                      |
|-----------------------|----------------------|
| Name Of Organization: |                      |
| Contact Name:         |                      |
| Address:              |                      |
| City, State, Zip:     |                      |
| Website Address:      |                      |
| Email Address:        |                      |
| Phone:                | Other Contact Phone: |

| APPLICANT             |                      |
|-----------------------|----------------------|
| Name Of Organization: |                      |
| Contact Name:         |                      |
| Address:              |                      |
| City, State, Zip:     |                      |
| Website Address:      |                      |
| Email Address:        |                      |
| Phone:                | Other Contact Phone: |

| EVENT INFORMATION   |             |  |       |
|---|-------------|--|-------|
| Name Of Event:  |             |  |       |
| Date Of Event:  | Start Time: | End Time:  |       |
| Type Of Event:<br><input type="checkbox"/> Run/Walk <input type="checkbox"/> Parade <input type="checkbox"/> Other  |             | Number Of Participants:<br>_____ People   _____ Vehicles   _____ Other |       |
| Additional Information:   |             | Additional Information:  |       |
| <p><b>Municipal Codes:</b> I, the Applicant/Sponsor, hereby agree that the event shall be conducted in an orderly manner with due regard for the convenience of the general public and with as little interference as possible with vehicles and movement of traffic. All lawful orders from police officers assisting with the event shall be followed.</p> <p><b>Indemnity:</b> I, the Applicant/Sponsor, agree to defend, indemnify, and hold the City of Springfield, and it's employees, harmless from and against all claims, losses, and liabilities arising out of personal injuries, including death and damage to property which are caused by the Applicant/Sponsor or arise out of or are in any way connected with the event authorized by this permit.</p> <p><b>Insurance:</b> If the Special Event requires the use of a public street, alley, trail, or other thoroughfare maintained by the City of Springfield, the Applicant/Sponsor agrees to provide a policy of liability insurance in the amount of \$500,000 per occurrence, with a general aggregate of \$1,000,000, naming the City of Springfield as an additional named insured, with appropriate endorsements as required by the City of Springfield Risk Manager. If the Special Event does not require the use of any thoroughfare maintained by the City of Springfield, other than sidewalks, the City of Springfield Risk Manager may waive the liability insurance requirement.</p> |             |  |       |
| <b>ATTACHMENTS:</b><br><input type="checkbox"/> Insurance Certificate <input type="checkbox"/> Event Participant Liability Waiver <input type="checkbox"/> Other:   |             |  |       |
| Sponsor's Authorized Agent Signature:   | Date:       | Applicant Signature:   | Date: |

**Parade or Race Route**

Sketch the parade or race route below. Include all street names of parade/race route and names of all cross streets. Identify all traffic control devices (stop signs, yield signs, and traffic lights) and direction of traffic control. Use additional paper if needed.



**CITY OF SPRINGFIELD USE ONLY**

Date Application Received: \_\_\_\_\_

Reviewed: \_\_\_\_\_ Date: \_\_\_\_\_ Permit Recommendation:  Approve  Deny  
(Special Events Section)

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reviewed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Special Events Coordinator)

Reviewed: \_\_\_\_\_ Date: \_\_\_\_\_  
(City of Springfield Risk Manager)

Reviewed: \_\_\_\_\_ Date: \_\_\_\_\_ Permit:  Approved  Denied  
(Chief of Police)