



City of Chipley

CITY HALL
1442 Jackson Avenue
P.O. Box 1007
Chipley, Florida 32428
(850) 638-6350 Fax: (850) 638-6353



Special Event Application

Name/Organization: CHS Project Grad c/o 2025

Address: 1545 Brickyard Rd. Chipley, FL 32428

Contact person: Missy Futch Phone: 850 373 3183 Fax: _____

E-mail: malesobrooks07@yahoo.com

Type of Event: Color Run 5K

Purpose of Event: raise funds for Project Grad
for class of 2025

Location of Event: Philip Roundtree Stadium Indoors/Outdoors

Date(s) & Time(s) of Event: 03/29/25 7:00 AM

Amount of Liability Insurance: participants will sign hold-harmless waiver (attach copy of policy)

Concert Yes/No If yes, What type of music? _____

Will food and nonalcoholic beverages be sold? bottled water

Will fireworks be displayed? Yes/No If yes, provide name, license number and pyrotechnic plan to be approved by Fire Chief.

Will amusement rides be available? No

Number of participants anticipated per day: 100-150

Are security and/or medical services provided? if needed

Applicant Signature: L Futch Date: 01/10/25

Approved { } Denied { }

Mayor's Signature: _____ Date: _____

RELEASE AND HOLD HARMLESS AGREEMENT

FOR THE SOLE CONSIDERATION OF the City of Chipley granting permission for the undersigned to conduct a _____ upon street(s) as provided for in it's letter of request, the undersigned agrees to indemnify and hold harmless the City of Chipley, it's successors, agents and assigns and all other persons, firms or corporations, from any and all claims, demands, damages, actions, causes of actions or suits of any kind or nature whatsoever, and particularly on account of all injuries, both to person and property, which may result from the use of the street(s) as described above, and releases forever discharges the City of Chipley, for any such Claims.

Undersigned hereby declares that the terms of this agreement and lease have been completely read and are fully understood and voluntarily accepted.

IN WITNESS WHEREOF, the undersigned has executed this release, this 14th day of January, 2025.

FIRM OR

ORGANIZATION: CHS Project Grad c/o 2025

[Signature]
Signature

Melissa Futch
Print Name

[Signature]
Witness

Witness

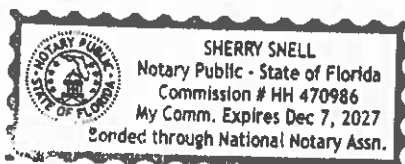
Sherry Snell
Print Name

Print Name

STATE OF FLORIDA
COUNTY OF WASHINGTON

The foregoing instrument was acknowledged before me by Melissa Futch, who is personally known to me or who produced FLDL as identification, and who executed the foregoing instrument and acknowledge before me that he/she executed the same freely and voluntarily and for purposes expressed therein.

Witness my hand and seal in the County and State last aforesaid this 14th day of January, 2025.



[Signature]
Notary Public



City of Chipley

CITY HALL

1442 Jackson Avenue

P.O. Box 1007

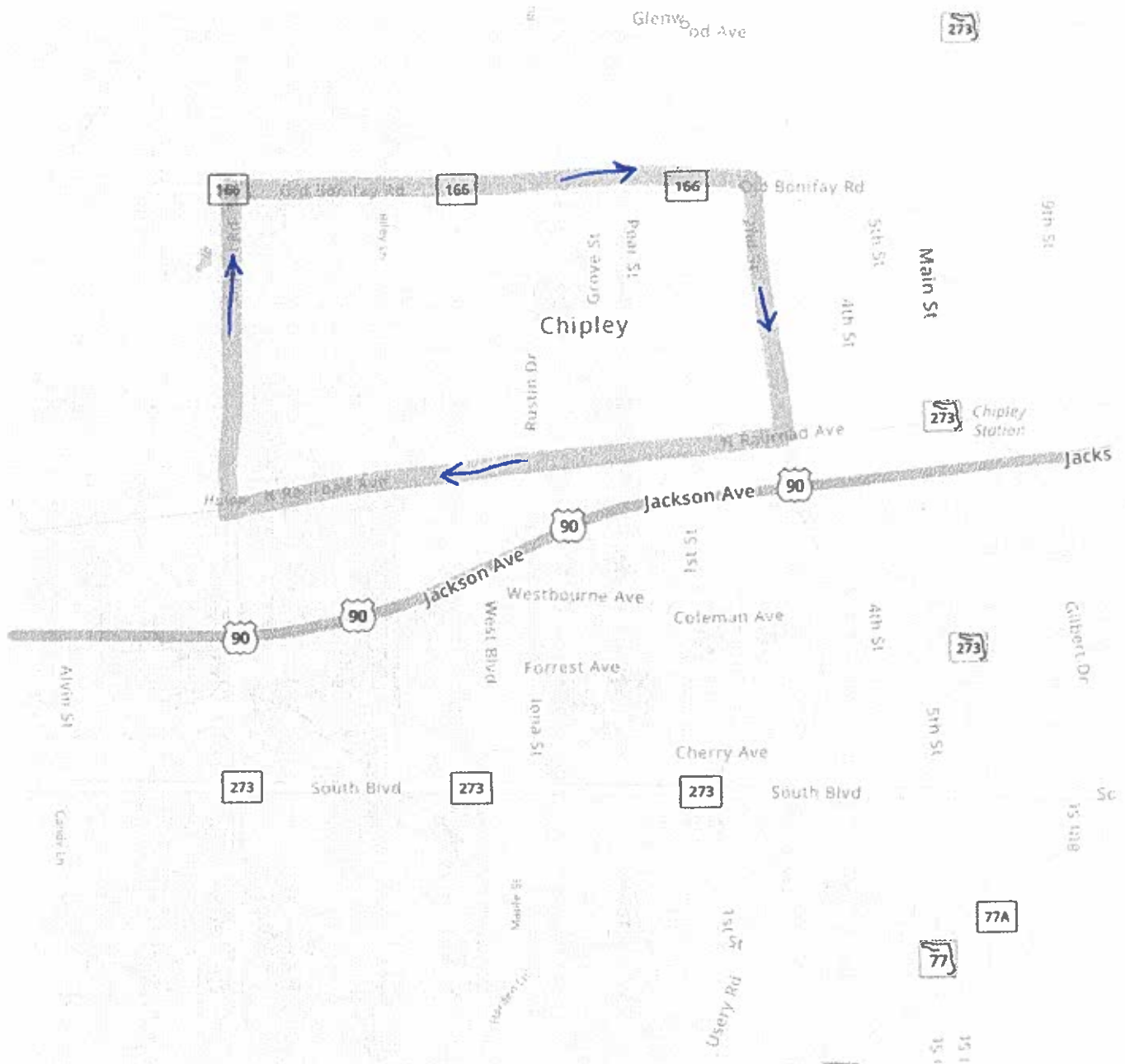
Chipley, Florida 32428

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Request for Temporary Closure of City Road/Sidewalk/Alleyway

Name of Organization: CHS Project Grad c/o 2025		Person in Charge: Missy Futch		Date:
Address of Organization: 1545 Brickyard Rd. Chipley, Fl. 32428			Telephone Number: 850 373 3283	
Title of Event: 5K Color Run Sponsored by Project Grad c/o 2025				
Date of Event: 03/29/25	Starting Time of Event: 7:00 AM	Duration of Event: 4 hrs	Actual Closing Time (Set up of barriers, Etc.) 11:00 AM	
Proposed Parade Route or Road/Sidewalk/Alleyway Closure (Include Exact Road Names and Map of Route): attached map				
This section is to be completed when closure is for special event filming.				
Liability Insurance Carrier:		Policy Effective Date:		
Coverage Amount:		(\$1,000,000 Minimum)		
Length of Coverage:		Days		
Licenses Pyrotechnics Operator:				
License Number:				
Approval of Local Fire Department:				
Federal Aviation Administration Approval for Low Flying Filming:				
Additional Liability Insurance Amount:				
PLEASE DO NOT WRITE BELOW THIS LINE				
Detour Route (Include Exact Road Names and Map of Detour Route):				
Name of Department Responsible for Traffic Control (City Police Department, Sheriff's Department, Highway Patrol): Chipley City Police Department				
Special Conditions: Use this route only!				
Name of Police Chief: Scott Thompson Michael Richter		Signature of Police Chief:		Date Signed:
Name and Title of City Official: Patrice Tanner, City Administrator		Signature of City Official:		Date Signed:



Draft



CHS PROJECT GRADUATION

COLOR RUN



Date: March 29, 2025

Time: 8am Start Time

7:30am Onsite Early Registration

Location: Philip Rountree Stadium

TICKET

\$35

(Includes T-shirt and Registration)

REGISTER NOW

Contact Info:

Missy Futch (850)-373-3283

Vickie Holt (850)-726-0286

Deadline to Sign-up is March 7th