

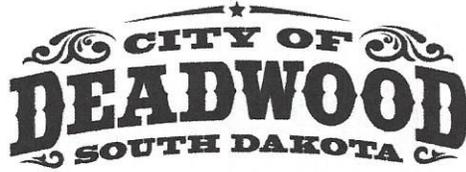
Event Complex Rental and Use Agreement

Event: Deadwood Mickelson Trail Marathon

Date: 6/4/22 - 6/5/22

The City of Deadwood has contracted with the Deadwood Chamber of Commerce and Visitors Bureau for the management and coordination of the Deadwood Event Complex. As an applicant for rental and use of any portion of the Deadwood Event Complex, you are required to contact the Chamber for coordination and assistance in the submittal of this application to the City. The Chamber can be contacted at the following address:

Deadwood Chamber of Commerce
767 Main Street
Deadwood, SD 57732
605-578-1876



Outdoor Event Complex
Deadwood, SD 57732

Deadwood Event Complex Rental and Use Agreement

Event Name: Deadwood Mickelson Trail Marathon, Half Marathon, 5 Person Marathon Relay 5K Kids 1K

Contact Information:

Name of Applicant: Emily Wheeler

Business/Organization: WEM, Inc

Mailing Address: 8510 Kings Court

City, State Zip: Rapid City SD 57702

Business Phone: 605-390-6137 Cell Phone: 605-390-6137

Email Address: emily@runcrazyhorse.com

Dates Event Complex requested:

Set up Date(s): 6/5/22 Hour(s): 4:30am

Event Date(s): 6/5/22 Hour(s): 4:30am-3pm

Clean-up Date(s): NA Hour(s):

Approximate number of people who will attend: 2000

I am applying to use the:
(Please check property requested)

- checkbox Ticket Booth
checkbox Main Grandstand Concession
checkbox Crow's Nest
checkbox Main Grandstand Restrooms
checkbox VIP Grandstand
checkbox Baseball Field(s)
checkbox Baseball Field Restrooms
checkbox Arena and Corral Areas
checkbox Venue Seating
checkbox checked Parking Lots

Table with 6 rows and 1 column: Office use Only, Key #

Deadwood Event Complex Rental and Use Agreement

Event Name: Deadwood Mickelson Trail Marathon

Compliance with Deadwood City Ordinances:

Please review the City of Deadwood Ordinances located on the City of Deadwood website: www.cityofdeadwood.com or by calling (605) 578-2082.

- 1) Deadwood Codified Ordinance - Chapter 8.12 – Noise. This ordinance must be adhered to. A violation of this ordinance could be grounds for refusing future rental requests.
- 2) Deadwood Codified Ordinance – Title 5 – Business License. This ordinance may apply.

Additional contacts:

Names & contact number of event representatives or sub-contractors (i.e. security, refuge, etc.):

Name: Emily Wheeler Title: Race Director
Phone: 605-390-6137 Representing: WEM, Inc

Name: _____ Title: _____
Phone: _____ Representing: _____

Deadwood Event Complex Rental and Use Agreement

Renter Type: For-Profit Private Non-Profit Government
 (Check One) *Categories above defined in the Complex Guidelines and Information Sheet*

Rental Fees:

	Event Complex Facilities	Parking Lots	Baseball Fields
Private	\$35 / Hr.	\$25 / Hr.	\$25 / Hr.
	\$300 / Day	\$200 / Day	\$100 / Day
Non Profit	\$30 / Hr.	\$25 / Hr.	No charge
	\$250 / Day	\$150 / Day	No charge
For Profit	\$75 / Hr.	\$65 / Hr.	\$35 / Hr.
	500 / Day	\$500 / Day	\$300 / Day
Government Agencies	No charge	No charge	No charge

Ticketed Events:

Events planning on the sale of tickets for attendees may choose to apply a ticket surcharge or facility use fee to each ticket sold in lieu of any rental fee above. The City of Deadwood has a ticket surcharge established by resolution in the amount of \$1.00 per ticket sold. **The City Of Deadwood reserves the right to apply the rental Fee regardless of any application for the use of the ticket surcharge in lieu of rental fees.**

Rental Fees subject to change.

Damage Deposit (Refundable): \$500 minimum (no alcohol) or \$1,000 minimum (serving alcohol)

Key Deposit (One Key or All Keys) (Refundable): \$100.00

Please read the Use Guidelines for cancellation and reservation policies.

Fees

Refundable Deposits

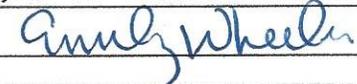
Event Complex Facilities	\$ _____	Key Deposit	\$ _____
Parking Lots	\$ <u>500</u>	Cleaning/Damage Deposit	\$ _____
Baseball Fields	\$ _____		
Total Fees	\$ <u>500</u>	Total Deposits	\$ _____

Please write separate checks to the City of Deadwood *(one check for event and one check for deposits)*

Organization: WEM, Inc

Name: Emily Wheeler

Title: Race Director

Signature: 

Date: 6/17/22

For Office Use Only:

Date Fees Received _____ Total(s): _____

City Representative: _____ Title: _____

Signature: _____ Date: _____