Join Salida Concerts on Saturday, July 17th at 6:30 pm in Riverside Park for an evening of music with the American Brass Quintet. Described by *Newsweek* as "the high priests of brass", the Quintet has nearly 60 recordings to its credit and have played more concerts in Salida than any other group we have had from the Aspen Music Festival and School. We are excited to offer this concert at no cost to the public as a thank you for your continued support of our organization and classical music.

Salida Park Rental & Special Event Form

This application must be filled out in its entirety and is a request only. Applications can be accepted or rejected.

Contact Name *
Mary Sandell
Contact Phone Number *
970-217-0051
Applicant/Entity Email *
mary@salidaconcerts.org
Event/Activity Name *
Salida Aspen Concerts - American Brass Quintet

• Public Event: Free and open to the public eg. concerts/festivals (60-90 days notice)

- Admission Based Event: A paid ticket or reservation is required for entry (60-90 days notice)
- Races: A paid race event that can include walking, running, biking etc (60 days notice)
- Special Occasion: A private event by invitation only eg. celebration/birthday party (14 day notice)
- Tournament (30 days notice)
- Assembly/First Amendment Activity (Recommended 5 business day notice)

Provide a short description of your activity. Include any website or social media handles associated with the event. *

Salida Aspen Concerts would like to host the American Brass Quintet at the Riverside ampetheater. We usually host a 6 concert season every summer in conjunction with the Aspen Festival and School of Music, however this summer and last were cancelled due to COVID. We recently (just 3 days ago) were approached by Aspen about the possibility of hosting the American Brass Quintet in an outdoor setting. I realize the Riverside Ampetheater usually requiures much more advanced planning but figured due to the unusual circumstances of the world, that there may be a chance of pulling this off.

We have not started advertising for this event as the details are unknown.

Our website is www.salidaaspenconcerts.org and our FB page is https://www.facebook.com/SalidaAspenConcerts/

Desired Location of Event/Activity *

\checkmark	Riverside Park
	Alpine Park
	Centennial Park
	Chisholm Park
	Chisholm Park Clubhouse
	Thonoff Park
	F street (For parades, walks/runs/bike races)
	Skatepark
	Marvin Park (For Baseball, Softball, Kickball tournaments or other uses)
	Centennial Courts (For Tennis or Pickleball Tournaments)
	"S" Mountain
	Another Street in Salida
	Monarch Spur Trail
	Other Trails on City Property
	Whitewater park
	Boatramp
	Other:
Estir	mated number of attendees? *
100	
100	
Star	t date desired *

MM DD YYYY

07 / 17 / 2021

Start Time Desired (please include load in time) *
Time
03:00 PM 👻
End date desired *
MM DD YYYY
07 / 17 / 2021
End Time Desired (please include load out time) *
Time
10:30 PM -
Will ANY of these features apply to your event? Check all that apply. *
Will ANY of these features apply to your event? Check all that apply. *
Have more than 50 attendees?
 Have more than 50 attendees? Sell food or merchandise?
 Have more than 50 attendees? Sell food or merchandise? Sell or dispense alcohol? (only allowed for non profit org)
 Have more than 50 attendees? Sell food or merchandise? Sell or dispense alcohol? (only allowed for non profit org) Use amplified sound?
 Have more than 50 attendees? Sell food or merchandise? Sell or dispense alcohol? (only allowed for non profit org) Sel amplified sound? Need to close a street or right of way?
 Have more than 50 attendees? Sell food or merchandise? Sell or dispense alcohol? (only allowed for non profit org) X Use amplified sound? Need to close a street or right of way? Require law enforcement, security or fire professionals?
 Have more than 50 attendees? Sell food or merchandise? Sell or dispense alcohol? (only allowed for non profit org) Use amplified sound? Need to close a street or right of way? Require law enforcement, security or fire professionals? Require fencing

Addendum A

1.	Do you plan on using any portion of the Salida Trail System (STS)? Yes No								
	If yes, describe when, how and where:								
2.	How many people do you plan to have at your event:								
3.	Will any food or merchandise be sold? Yes No If yes, FOOD AND SALES TAX LICENSES MUST BE OBTAINED. Contact the Colorado Department of Revenue for sales tax licenses at (303) 232-2416, and the Chaffee County Public Health Department for food licenses at (719) 539-2124. Vendors must have a fire extinguisher on site. Vendor booths are subject to inspection by the Salida Police and Fire Departments.								
4.	Will alcoholic beverages be sold and/or dispensed at your event? YesNo If yes, please fill out the Application for Special Events Liquor License and submit it along with the necessary fees. A State of Colorado Special Event Liquor License permit is ONLY issued to incorporated non- profit organizations. EVENTS REQUIRING ALCOHOL LICENSES MUST SUBMIT THEIR APPLICATION AT LEAST 90 DAYS IN ADVANCE OF THE EVENT.								
5.	Will there be amplified sound at your event? Yes X_ No								
5.	Are street closures proposed for your event? Yes No X If yes, where and when?								
<i>.</i>	Will you require any law enforcement services specific for your event? Yes No X If yes, for what purpose (security, traffic, parking or public control, Salida Trail System crossings, etc.?								
	Dates and times officers needed?								
	Dates and times officers needed? Please attach the event's Security Plan. The City of Salida requires reimbursement for the cost of providing police and								

safety measures above the standard for the time and date of any event.

- 8. Where do you plan for people to park for your event? At riveside park, in the lot across the river (by the cubove) and on the streets.
- 9. Please explain your **Emergency Action Plan**, **including First Aid Stations**, Communication and public safety agencies. Please attach additional documents to this application with the details.

See attached

10. Will you need event insurance? Yes _____ No _____ Events to which the PUBLIC is invited require insurance. Please refer to #11 under Provisions for Park Rentals and Park Rules. Proof of insurance will be required with this application and must list the City as an additional insured party.

11. Please provide a timeline for your event #/17-5:30 pm Set up, Cei30 pm Concert, 8:30 pm concert Complete & clean up starts. 9:00 pm-Done

12. Please list any other needs or requirements that have not been covered.

13. Signature Man Stachel



City of Salida Special Event Emergency Action Plan

I, the undersigned, agree to comply with the following Emergency Action Plan to the best of my ability. The first person on this list will be the designated Emergency Manager and will take responsibility for public addresses and instruction to the event participants.

Emergency Manager (1 lead, 2 alternates)	Contact info 1	Contact info 2	Signature
1. Mary Sandell	970-217-0051	719-207-4456	Man Sundylell,
2. Chen Hardy - Moore	9708461251		all & Sam
3. Graced Morritte	303-547-2917	/	Ardre Morrisette
4.			

Please complete the following template according to your Events plan and location. The following procedures should be followed in the event of an emergency.

the following procedures should be followed in the event of an

Communications

- 1. The manager or designee will communicate the designated evacuation space to participants at the beginning of the event.
- 2. The Emergency Manger will communicate to the event participants in an emergency with a
 - Bull Horn
 - PA system
 - Emergency level voice

Fire

- 1. Call 911
- 2. Assist injured or disabled personnel.
- 3. Evacuate the building. Activate emergency shutoffs if available.
- 4. Attempt to use a fire extinguisher only if you have been trained.
- 5. Evacuate participant to

Medical Emergency

- 1. Identify the medical emergency.
- 2. If life threatening, call 911.
- 3. Administer first aid if properly trained.
- 4. Evacuate the injured person to HRRMC

Violent incident

- 1. Call 911.
- 2. Attempt to avoid the situation move participants away
- 3. Try to deny contact-evacuate to Cars and local business lock/block doors, turn off lights, silence phones.
- 4. If necessary defend distract, attack, subdue.

Severe Weather/Natural incident

- 1. Move participants away from threat if possible.
- 2. Evacuate to Cars/Homes/local business
- 3. Call 911

Urgent Situation (suspicious person, package, activity or bomb threat)

- 1. Call 911.
- 2. State who, what, where, when, why, and how situation occurred.
- 3. If bomb threat, turn off all electronics.

1637232 Salida Concerts Inc.

Certificate Of Insurance

6/30/2021 8:19:18 PM

ACORD [®] CERTIFICATE OF LIABILITY INSURANCE								Γ	DATE (MM/DD/YYYY) 6/30/2021		
THIS CERTIFICATE IS ISSUED AS A CERTIFICATE DOES NOT AFFIRMAT BELOW. THIS CERTIFICATE OF INS REPRESENTATIVE OR PRODUCER, A	IVEL SURA	Y OR NEGA	ATIVELY AMENI), EXTE	ND OR ALT	ER THE CO	VERAGE	AFFO	RDED E	BY THE	POLICIES
IMPORTANT: If the certificate holder If SUBROGATION IS WAIVED, subject this certificate does not confer rights t	to th	e terms and	d conditions of t	he polic	y, certain po	olicies may r					
PRODUCER	o trie	Certificate I		CONTA		•					
Sinsureon				É-MAIL	o, Ext): (844) 3	87-3240			FAX (A/C, No):	877-8	26-9067
Insureon (BIN				ADDRE							
30 N. LaSalle, 25th Floor, Chicago, IL 60602					INSURER(S) AFFORDING COVERAGE						NAIC #
INSURED					INSURER A : Philadelphia Insurance Companies						18058
Salida Concerts Inc.				INSURE							
PO Box 13, Salida, CO, 81201				INSURE							
				INSURE							
				INSURE							
				INSURE	RF:						
COVERAGES CER THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY R CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	s of I Equir Pert	EMENT, TEF AIN, THE IN	LISTED BELOW H RM OR CONDITIO SURANCE AFFOR	N OF AN DED BY	Y CONTRACT THE POLICIE	OTHE INSURE OR OTHER I S DESCRIBEI	Documen D Herein) above NT WITH	E FOR T I RESPE	ст то	WHICH THIS
TR TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)			LIMI	rs	
COMMERCIAL GENERAL LIABILITY							EACH OC			\$ ^{1,000} \$ ^{300,0}	
CLAIMS-MADE CCUR							PREMISE				
	Yes						MED EXP	(Any one p	person)	\$ Exclu	
· []	res		EV74269		7/17/2021	7/18/2021	PERSONA	L & ADV I	NJURY	\$ 1,000	
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POLICY PRO- JECT LOC OTHER:							PRODUCT	S - COMP	/OP AGG	\$ ^{3,000,}	000
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EXCESS LIAB CLAIMS-MADE							AGGREGA	TE		\$	
DED RETENTION \$									OTU	\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STA1	UTE	OTH- ER		
ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH	ACCIDEN	T	\$	
(Mandatory in NH)	1						E.L. DISE	ASE - EA E	MPLOYEE	\$	
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEA	ASE - POL	ICY LIMIT	\$	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORD 101, Add	litional Remarks Sche	dule, may b	be attached if mo	re space is requir	red)				
Special Event: Riverside Park 7/17/21											
City of Salida is named as Additional Inst	ured a	as their inter	ests may appear	in regar	ds to Genera	al Liability					
CERTIFICATE HOLDER				CAN	CELLATION						
City of Salida 448 E. 1st Street Suite 112				THE	EXPIRATIO	THE ABOVE D N DATE THE TH THE POLIC	EREOF, I	NOTICE			
Salida, CO 81201						NTATIVE	0 /				
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CITY OF SALIDA

Permit #: ____

AMPLIFIED SOUND PERMIT

Please fill out form completely, sign and date prior to submission.

Pursuant to Article IX Section 10-9-80 S.M.C., <u>Solida Concerts Trec.</u> (Permittee) has been granted this permit to exceed the maximum sound levels established in Article IX Section 10-9-80, S.M.C., in accordance with the following terms and conditions:
Permittee: Salida Concetts, Inc
Address: PO Box 13, Salida (0 81201
Telephone: 9719 - 207 - 4456
Individual supervising sound (if different from Permittee):
Activity/event: American Bruss Quintet Concert
Type of sound amplification equipment authorized (if any): <u>PA System</u>
Location: <u>Riverside Bandshell</u>
Date(s): $Joly 17th 2021$ Hours of operation: $3:00 - 9:30 pm$
Hours of operation: $3:00 - 9:30 pm$
Additional terms/conditions (attach additional sheets if necessary):
Expiration:
This permit will not be issued beyond 10:00 p.m.
The Permittee shall ensure that the sound/activity authorized by this permit shall be conducted in compliance with all applicable City ordinances and regulations, and a failure by the Permittee to do so, or to comply with all terms and conditions set forth hereinabove, may result in the summary revocation of this permit.
Accepted and agreed to by the Permittee:
Date: 2021

Approved by the City Administrator on the _____ day of ______.

City of Salida: ______ (City Administrator)

Copies to: Police ____ Public Works ____ Fire ____ City Clerk _____ City Zoning _____ January, 2009 Amplified Sound Permit