

Salida Sunrise Rotary Club
10th Anniversary Celebration
Date: August 29, 2021, 1-5 pm

Overall Purpose:

Salida Sunrise Rotary (SSR) is planning this event to celebrate 10 years of service to the Salida community. The activities involved tie in with our purpose of "Service Above Self" and will offer the broader community an opportunity to learn more about how they benefit from our club's presence in Salida, interact with SSR members and participate in fun activities.

Activities:

Food and Beverages

We plan to have cupcakes and water available to those who join the anniversary celebration. We are not applying for a liquor permit, so no fencing will be required.

Lucky Ducky Race

This fundraising event will generate money to give back to the community in the form of student scholarships for post-high school college or trade school, as well as money for grants to local nonprofits for projects.

Logistics:

- 10.5" Rubber Ducks will "race" on a short stretch (approximately 100 yards) of the Arkansas River in a cordoned-off lane south of the F Street bridge.
- We have currently planned 3 defined races made up of a total of 8 "heats" of no more than 20 big ducks each. With only 20 ducks in a given heat, it will be easily manageable for the big ducks to be retrieved by SSR at the end of each heat.
- We will have some members in kayaks in the river to assist those on the shore in supporting the race and gathering the ducks.

We will be submitting the appropriate permitting paperwork to Colorado Parks & Wildlife for review and approval.

Community Booths

We will offer the opportunity for local nonprofit/community organizations to set up booths to share information about their organizations. The booths will not be selling any merchandise, though they may receive donations.

Each community group will be responsible for set-up and tear-down of their booth within designated times.

Kids Activities

We will offer a few activities for kids to do at the event. The activities will be managed by multiple Rotary volunteers. Parent/responsible adult for each child will be required to stay in the immediate area of the activities. Some of the non-profit booths may also offer kids activities.

Music

We would like to use the Band Shell for musical performances. We understand that an amplified sound permit is required for this, and we will abide by the requirements of the permit.

Safety Plan/Emergency Procedures

We will notify local law enforcement and HRRMC of the event. We don't anticipate a need for any special services or dedicated personnel at the event based on activities we're having.

We will have at least 2 designated individuals who will be responsible for contacting emergency services as needed. They will also serve as the point people for emergency personnel at Riverside Park if there's an incident.

If bad weather becomes an issue, we plan to use the Band Shell amplified sound system to notify guests to seek shelter.

For the Ducky Race, We will have a retired physician and nurse on scene. We will have a retired river rescue instructor on scene. We will have two boats in the river.



Salida Sunrise Rotary 10th Anniversary Celebration - Salida event request - Special Permit Trigger - please review

diesel.post@cityofsalida.com <diesel.post@cityofsalida.com> Tue, Apr 27, 2021 at 11:46 AM
To: diesel.post@cityofsalida.com, ryan.wiegman@cityofsalida.com, sara.law@cityofsalida.com, william.taliaferro@cityofsalida.com, cat.hileman@cityofsalida.com, jfranz0621@gmail.com

Thank you for your event request application. Please review the information below to ensure that it is correct.

Applicant name :: Janet L. Franz

Applicant email:: jfranz0621@gmail.com

Applicant phone number:: 719-239-0204

Name of event: Salida Sunrise Rotary 10th Anniversary Celebration

Short description of your event: An event to celebrate 10 years of the Salida Sunrise Rotary Club including a Lucky Ducky Race, booths for community non-profit organizations and kids activities. This could also include use of the Amphitheater for performances by Rotary Club Members.

Location desired - select all that apply: Riverside Park

Start date desired: 8/29/2021

End date desired: 8/29/2021

Will any of these apply to your event? : Yes

[Have more than 50 attendees or is public invite?]: Yes

[REDACTED]

[Use amplified sound?]: Yes

[Need to close a street or public right of way?]: No

[Require law enforcement or security?]: undefined

[Require municipal water or electricity hook ups?]: No

[Require City fencing, road barricades, cones or sprinkler marking?]: Yes

Because of your answers to the request form, the City's events committee must review your needs.

You will be receiving an email from each of the Department directors listed in this email with instructions and approval (if relevant).

Thank you for your interest in holding an event in Salida.

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:

Sidewalk next to river by Riverside Park for observers
of the ducky race

2. How many people do you plan to have at your event: ~ 300

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?

Yes ☐ No ☒

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 ☒ No ☐

6. Are street closures proposed for your event? Yes ☐ No ☒

If yes, where and when? _____

7. Will you require any law enforcement services specific for your event? Yes ☐ No ☒

If yes, for what purpose (security, traffic, parking or public control, Salida Trail System crossings, etc.)?

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?

Public parking

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.

Rotary International

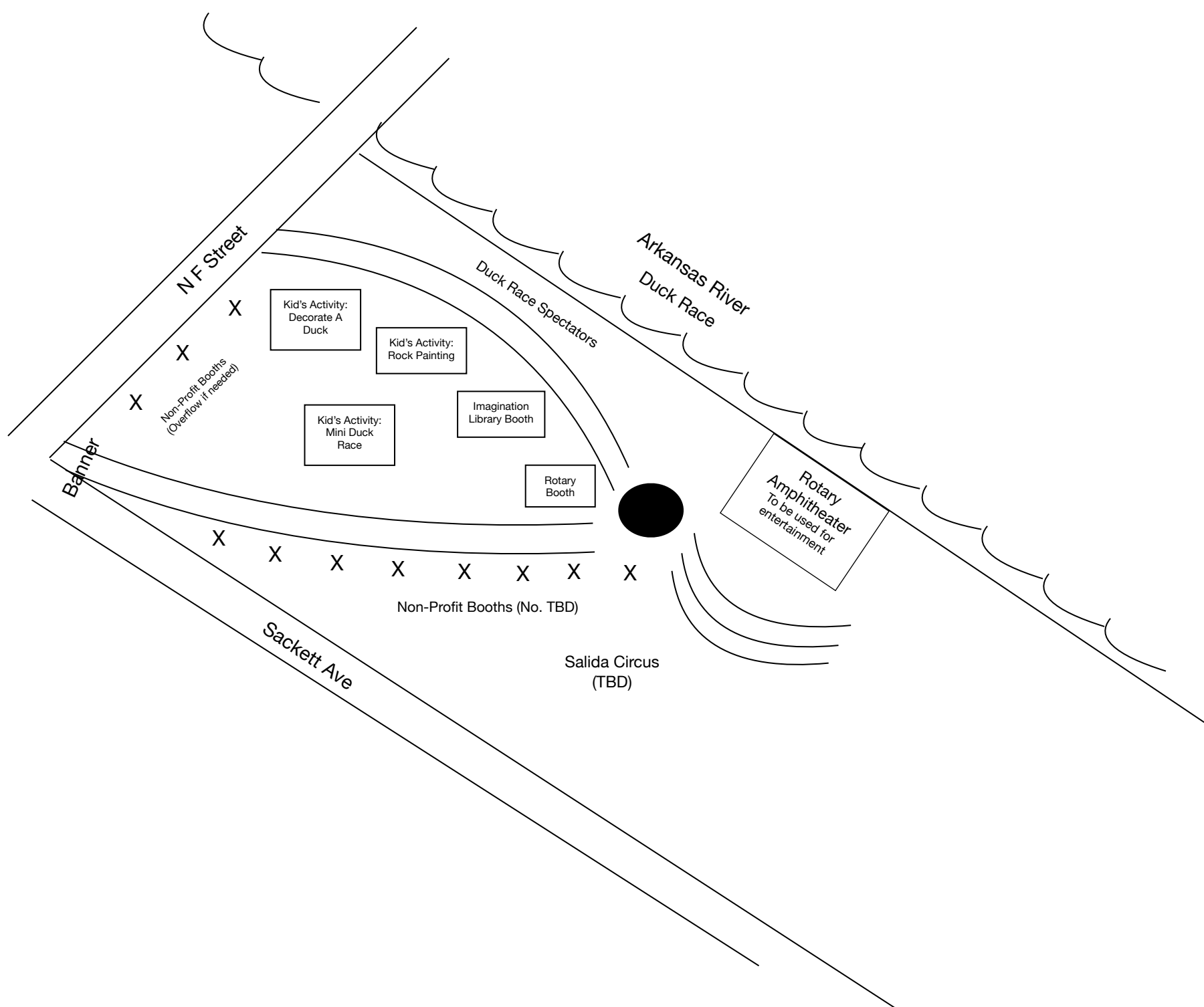
11. Please provide a **timeline** for your event

Set up NOON - 1pm
Event 1pm - 5pm - music, duck race, socializing
Clean up 5pm - 6pm

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

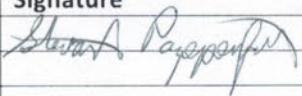
13. Signature

Charlotte Karls for Saluda Sunrise Rotary Club



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. <u>Stew Pappenfort</u>	<u>719 221 4905</u>		
2. <u>Harry Payton</u>	<u>207 756 2970</u>		
3. <u>Deborah Payton</u>	<u>207 756 1570</u>		
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.

Communications

1. The manager or designee will communicate the designated evacuation space to participants at the beginning of the event.
2. The Emergency Manager 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 ^{area} ~~building~~. Activate emergency shutoffs if available.
4. Attempt to use a fire extinguisher only if you have been trained.
5. Evacuate participant to safe area away from fire/smoke

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 area as directed by E.M.S.

Violent incident

1. Call 911.
2. Attempt to avoid the situation – move participants away
3. Try to deny contact-evacuate to safe area as directed by police
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 area away from the threat
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.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/03/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Arthur J. Gallagher Risk Management Services, Inc. 2850 Golf Road Rolling Meadows IL 60008		CONTACT NAME: Ali Sulita PHONE (A/C, No, Ext): 1-833-3ROTARY E-MAIL: rotary@ajg.com ADDRESS:		FAX (A/C, No): 630-285-4062
INSURED All Active US Rotary Clubs & Districts Sunrise Rotary of Salida ATTN: Risk Management Dept. 1560 Sherman Ave. Evanston, IL 60201-3698		INSURER(S) AFFORDING COVERAGE INSURER A: Lexington Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:		NAIC # 19437

COVERAGES

CERTIFICATE NUMBER: 899307648

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SURR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Liquor Liability Included GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	015375594	7/1/2020	7/1/2021	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		015375594	7/1/2020	7/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$		NOT APPLICABLE			EACH OCCURRENCE \$ AGGREGATE \$ \$
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A	NOT APPLICABLE			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The Certificate holder is included as additional insured where required by written contract or permit subject to the terms and conditions of the general liability policy, but only to the extent bodily injury or property damage is caused in whole or in part by the acts or omissions of the insured.

CERTIFICATE HOLDER

City of Salida Colorado
 Sunrise Rotary of Salida (District 5470)
 Salida Sunrise Rotary 10th Anniversary Celebration
 Riverside Park
 August 29, 2021

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Ali Sulita

CITY OF SALIDA

Permit #: _____

AMPLIFIED SOUND PERMIT

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

CK
5/26/21

Pursuant to Article IX Section 10-9-80 S.M.C., Salida Sunrise Rotary (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 Sunrise Rotary/ Janet Franz

Address: PO Box 1044 Salida CO 81201

Telephone: 719-239-0204

Individual supervising sound (if different from Permittee): Steve O'Neill

Activity/event: 10th Anniversary Celebration

Type of sound amplification equipment authorized (if any): loud speakers,
amplifiers, PA system

Location: Riverside Park

Date(s): August 29, 2021

Hours of operation: 12-5pm

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: _____

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