

SPECIAL EVENT APPLICATION

CITY OF TOMBALL, TEXAS | 401 Market Street | Tomball, Texas 77375 | 281-351-5484

An application to stage an event within the City of Tomball shall be filed with the Community Events Coordinator at least 180 days prior to the event. This application is not to be construed as authorizing or agreeing to any event until formally approved by Tomball City Council.

Date: 1/6/22 Is this event Co-City sponsored? Yes No _X
Request for permission to use a public venue for the following type of event (please check one): Festival Community Event Arts & Crafts Event Music Event X Other (specify)
1. Event title: Big Show at the Depot
2. Sponsoring entity: Tomball Rotary Club
3. Is this organization based in Tomball: Yes _X_ No
4. Is this organization non-profit _X_ or for-profit *Attach 501 (c) (3) tax exemption if applicable
5. Contact: Russel Blue or Caley Baillio Phone: 281-755-9978 or 832-205-0207
6. Contact address: PO Box 64, Tomball, TX 77377
7. Contact email: rblue@jrbadvisorgroup.com & Caley@sftomball.com
8. Event date: <u>10/22/22</u>
9. Event times: Start 3pm Finish _9:30pm Set-up _8am Breakdown10pm
10. Is this event for charity? Yes X No
11. If yes, what charity? Tomball Rotary Foundation Tax ID 27-4719115
12. If yes, what percentage of net proceeds will be donated to the charity? 100% (and scholarships)
13. On-site contact: Caley Baillio Mobile Phone: 832-205-0207
14. Estimated number of attendees: 2500
15. Detailed site map in attached: Yes x_ No
16. Is this event open to the public: Yes X_ No
17. Admission fee: \$100 for 2 people Free
18. Time at which event staff will begin to arrive: _8am
19. The applicant will defend and hold harmless the City of Tomball from all claims, demands,
actions or causes of action, of whatsoever nature or character, arising out of or by reason of the
conduct of the activity authorized by such application including attorney fees and expenses.
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20. The applicant will provide proof of general liability insurance for the event naming the City of
Tomball as additional insured.
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21. Name of insurance carrier: _Lexington Insurance Co
22. Organization has secured date with the Public Works Dept. and has paid depositNo
Signature: Calsy Baillio
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FOR OFFICIAL USE - Fee required: Yes No Amount Due: \$