TOWN OF WESTMINSTER ROAD RACE APPLICATION

******This document will need to be updated any time there are changes**

DATE/REVISION OF THIS APPLICATION:

EVENT: What is the title of your event?

APPLICANT/ORGANIZATION:

EVENT MANAGER: Who is the event manager that day and what is their contact information for the day of the event in case of any problems that day?

DATE:

BENEFIT: Is this event in support of any group or charity? If yes, please explain.

If no, what is the purpose for this event?

LOCATION:

SCHEDULE: Event start and ending times:

RACE COURSE: Please describe course/route in detail, and attach a map.

PARKING:

ANTICIPATED PARTICIPATION: How many people are expected to turn out and are there any groupings or teams?

RESTROOMS:

Location(s) and number of restroom(s):

PORT-A-POTTYS: Location(s) and number of port-a-pottys: What is the name of the Company you are renting these from?

FOOD:

Do you plan any food concessions?

Are you providing any food or drinks to race participants? (Please describe)

TEMPORARY STRUCTURES: Do you plan any tents or other temporary structures? Please describe.

MEDICAL/EMERGENCY PLAN: How do you plan on addressing medical emergencies?

COMMUNICATIONS PLAN: Do you plan on having any race marshals and will they have communication between each other?

SIGNAGE:

ROAD CLOSURES:

INSURANCE/LIABILITY: A Certificate of Insurance showing the Town of Westminster as certificate holder must be submitted prior to approval.

POLICE DETAIL: Please indicate if your event will require a police detail.

For billing purposes, please provide the following: Agency Name: Contact Person: Billing Address:

FINAL UPDATES/NOTIFICATIONS:

Once applicant has received all Department approvals, it will be determined whether the Board of Selectmen's approval will be required.