## **Application for Racing Event Permit**



City of Smyrna 2800 King Street Smyrna GA 30080 770-434-6600

Please print legibly or type.

September 28, 2022
Date of Application

I.	Permit Applicant Information			
	Applicant's Full Name Principal Ashley Campoli			
	Address 605 Glendale Place Smyrna, GA 30080			
	Phone # 678-842-6810 FAX #			
	Email rachley campalify cohk 12 are			
	(ISNY). Cample Coldo K12 Drg			
þ	plication must include a copy of the applicant's state issued photo ID.			
II PF	Sucation must include a copy of the applicant 5 state issues page 2.			
	Event Organizer Information.			
	Event Organizer Information.  Organization/Group Name Belmont Hills Elementary School			
	Event Organizer Information.  Organization/Group Name Belmont Hills Elementary School  Name of Event Character Parade			
	Event Organizer Information.  Organization/Group Name Belmont Hills Elementary School			

## VII. Applicant Certification

- 1. Event organizer must include an executed copy of the release and indemnity form signed by a representative authorized to sign such a document.
- 2. Applicant agrees to secure an approved Emergency Medical Services plan from the Emergency Medical Services Director of the Smyrna Fire Department and submit the approved plan to the Office of the Assistant City Administrator no later than 30 days prior to event.
- 3. Applicant agrees to secure Comprehensive Liability Insurance up to \$500,000 per the terms of Chapter 11 of the City Code and to provide documentation to the Assistant City Administrator no later than 30 days prior to the event. Please refer to the Insurance Guidelines for clarification.
- 4. Applicant confirms that all information that has been provided is accurate to the best of their knowledge and no misrepresentations have been made. False or inaccurate information may result in the denial or revocation of the event permit.

Proof of all required items need to be attached to the application.

Permit will receive initial approval for the date and time of the event and final approval will only be received after all documents (proof of insurance, approved EMS plan) have been provided to the City of Smyrna at least 30 days prior to event.

I also understand that the permit fees, and fees due the officers are to be paid before the start of the event.

Applicant Signature	Campon	
*********	(Police Department Use Only)	**************************************
Approve Robert Harvey  Modification	Deny	8:55am unt 9:30am
Police Department Comments pedestrians are confined to the See Attachments	Assign 2 officers to block roadway, walking route.	navigate traffic and ensure

## CITY OF SMYRNA RELEASE AND INDEMNITY AGREEMENT

understoned event sakt special participation in consideration of organization/business/group/individual hereby agrees and warrants that they shall release, defend, indemnify and save harmless the City of Smyma, its officers, directors, employees and any other person, firm or corporation charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors and assigns and agents from any and all costs, expenses, restrictions, claims, demands, suits, actions, proceedings, damages, liabilities, deficiencies, judgments, levies, costs or expenses, including, but not limited to, attorney's fees and expenses of any kind end nature, including, but not by way of limitation, any claim for damages to property or injuries to or death of any person or persons relating to or arising from the special event or related activities, regardless of whether arising from the negligence or wrongful ects, errors or omissions of the City of Smyrns.

Without limiting the generality of the foregoing, the undersigned organization/business/group/individual agrees that they shall reimburse the City of Smyrna for legal fees and other costs incurred in the City of Smyrna's defense of such claims of litigation. The City of Smyrna shall have the right to participate in the defense of any claims or litigation and shall have the right to approve any satisfament.

This release extends and applies to, and also covers and includes, all unknown, unforescen, unanticipated and unsuspected injuries, damages, loss and liability, and the consequences thereof, as well as those now disclosed and known to exist. The provisions of any state, federal, local or territorial law or statute providing in substance that releases shall not extend to claims, demands, injuries or damages which are unknown or unsuspected to exist at the time, to the person executing such release, are hereby expressly waived.

The undersigned organization/business/group/individual acknowledges that the agreement hereby releases and discharges the City of Smyrna, it officers, directors, employees and agents, of any and all claims, relating to any bodily and personal injuries or damages to property and the consequences thereof resulting from their participation in the said special event. I do hereby covenant with the City of Smyrna that I, my heirs, executors, assigns and transferses will never at any future time suc the City of Smyrna for or on account of any claim for damages enising out of my participation in the said special event whether such claims arise by negligence of the City of Smyrna, its employees or agents, or by the negligence of any other participant.

It is further agreed and understood that said participation in the special event is not to be construed as an admission of liability and acceptance of assumption of responsibility by the City of Smyrna, its officers and members.

This is the 3rd day of SEPTEMEN, 2022

NAME OF ORGANIZATION/BUSINESS/GROUP/INDIVIDUAL:

Belmont Hills Elementary

INDIVIDUAL RESPONSIBILITY Will (Signature)

