

# Application for Racing Event Permit



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

*Please print legibly or type.*

October 1, 2018  
Date of Application


## I. Permit Applicant Information

Applicant's Full Name Principle Ashley Campoli  
Address 605 Glendale Place Smyrna, Ga 30080  
Phone # 678-842-6810 FAX # \_\_\_\_\_  
Email Ashley.Campoli@cobbk12.org

\* Application must include a copy of the applicant's state issued photo ID.

## II. Event Organizer Information.

1. Organization/Group Name Belmont Hills Elementary School  
Name of Event Character Parade  
Address 605 Glendale Place Smyrna, Ga 30080  
Phone # 678-842-6810 FAX# \_\_\_\_\_  
Email Ashley.Campoli@cobbk12.org

Approved 10/9 

**III. Event Coordinator/Director.**

Please provide the complete information and contact info for the professional race coordinator. Include a 24-hr contact number where they can be reached regarding the event.

Name: Principle Ashley Campoli  
Phone Number: 678-842-6810  
Email Address: Ashley.Campoli@cobbk12.org

**\*Application must include a copy of the coordinator's state issued photo ID.**

**IV. Purpose.**

Please describe the reason for your application and the event:

Students from the school (Belmont Hills Elementary School) will dress as their favorite storybook character. The administration will parade the children through the school campus, then onto Glendale Place eastbound for approximately 200 feet (from the west entrance), and back into the main entrance. There will be between 200-300 students involved, along with the entire school administrative staff acting as guides. Our Character Parade will be held on Friday, October 19th at 9 am and conclude at approximately 9:20 am.

**V. Event Details.**

Date of Activity (mm/dd/yy) 10 / 19 / 18  
Starting Time 0900 Finishing Time 0920  
Number of participants 200-300 Number of Vehicles (if any) 0

**VI. Event Route.**

Racing Events must select a pre-approved route as designated by the Police Department.

5K: Route # \_\_\_\_\_ 10K Route # \_\_\_\_\_

Attach a copy of the proposed route and indicate on the map any planned assembly locations.

Identify specific assembly locations and describe any planned activities or intended uses for those locations: Students will assemble on the campus of Belmont Hills on the south side of the building. At 0900, administration will move the students towards the west entrance, east towards the east entrance, then back onto the main campus.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 Anthony Campoli Date 10/2/18

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(Police Department Use Only)

Approve  Deny  Modification

Police Department Comments \_\_\_\_\_  
 OIL MRC  
 OK Put  
 See Attachments \_\_\_\_\_

\*\*\*\*\*

**PERMIT**

VIII. The application for Racing Event Permit as outlined in the application section is hereby granted for the stated purpose at the listed location and date.

Assistant City Administrator \_\_\_\_\_ Date \_\_\_\_\_

*Denied for the following reasons:*

\_\_\_\_\_  
 \_\_\_\_\_

Assistant City Administrator \_\_\_\_\_ Date \_\_\_\_\_

Notice to permit holder: This permit, any limitations, attachments, or instructions must be kept with the person in charge and on the premises where the event is to be held.

The mere filing of the permit application does not mean that the date requested is secured. It is strongly recommended that any event should not be published or advertised until the final approval is received.

City of Smyrna  
 2800 King Street (City Hall)  
 Smyrna GA 30080

City Hall Reception 770-434-6600	Police Department 770-319-2534	Fire Department 770-434-6667
Community Relations 678-631-5401	Parks and Recreation Department 770-431-2842	EMS Director (Fire) 678-631-5461

**CITY OF SMYRNA  
RELEASE AND INDEMNITY AGREEMENT**

In consideration of participation in said special event the undersigned organization/business/group/individual hereby agrees and warrants that they shall release, defend, indemnify and save harmless the City of Smyrna, 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 and 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 acts, errors or omissions of the City of Smyrna.

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 settlement.

This release extends and applies to, and also covers and includes, all unknown, unforeseen, 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, its 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 transferees will never at any future time sue the City of Smyrna for or on account of any claim for damages arising 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 \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

NAME OF ORGANIZATION/BUSINESS/GROUP/INDIVIDUAL:

INDIVIDUAL RESPONSIBILITY

Amley Campos  
(Signature)



**Belmont Hills Elementary School**

**Address:** 605 Glendale Pl SE, Smyrna, GA 30080

**Phone:** (678) 842-6810

**Website:** <http://www.cobbk12.org/BelmontHills/>

Character Parade



Data from: Zillow · Schooldigger · Greatschools · Freebase