



- FOR OFFICE USE ONLY**
- Site Plan
 - Raffle Application
 - Temp. Liquor License App.
 - Event Application
 - Property Owner Permission
 - Insurance Certificate

SPECIAL EVENT APPLICATION

Please complete this form in its entirety. This application must be submitted a minimum of 45 days prior to the event.

Applications and all accompanying documents can be e-mailed (preferred) or dropped off at the Village of Long Grove:

**Village of Long Grove
3110 Old McHenry Road
Long Grove, IL 60047
847-634-9440
forms@longgroveil.gov**

Submittal Date: July 19, 23 Date Received: _____

EVENT INFORMATION

Event Name & Location(s): "Let's Cure T1 Diabetes!" at Brothers' Field
 Description/Type of Event: This event has a live band. We are partnering with JDRF to fundraise for Kids Diabetes.
 Event Date: 9-9-23 Hours: 3 PM to 11 PM

Set Up for Event
 Date: 9-9-23
 Hours: 1 PM to 3 PM

Dismantling of Event
 Date: 9-9-23
 Hours: 11 PM to 11:30 PM

Estimated Number of Attendees: 150

Estimated Number of Vendors: _____

Sponsoring Organization: Brothers' Field
 Street Address: 340 Old McHenry Road
 City: Long Grove State: IL Zip Code: 60047
 Phone Number: 224-239-0912 Fax Number: _____
 Contact Person: Bradley Obernieder Phone Number: _____
 E-mail Address: brothersfieldlonggrove@gmail.com

Additional Information

Include with this application the following:

- 1. A site plan of all areas of the B-1 District covered by the event. On the plan, mark the sanitary facilities and auxiliary parking lots (if applicable).
- 2. Written permission from property owners
- 3. Certificate of insurance naming **both** Historic Downtown Long Grove Business Association and Village of Long Grove as additionally insured.
- 4. Indicate the requested areas of the roadway and parking that will need to be closed and barricaded for this event if it applies.
- 5. Provide the number of security and police officers needed and the times for each (if required per approval)

| | | |
|-----------------------|----------|----------------------|
| A. Security officers | <u>0</u> | Hours _____ to _____ |
| B. Traffic officers | <u>0</u> | Hours _____ to _____ |
| C. Parking Assistants | <u>0</u> | Hours _____ to _____ |

- 6. Indicate whether there will be any of the following:
(before ordering banners or temporary signs, check with the Village Planning Team)

| | | |
|--------------------|------------------------------|--|
| A. Banners | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| B. Temporary Signs | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| C. Other (specify) | _____ | |

If you answered yes, provide a design, location, time to be posted, and written permission of the owner(s) where these items will be posted.

- 7. Indicate promotional materials and advertising to be used (check all that apply):

| | | |
|---|--|--|
| <input type="checkbox"/> Newspapers | <input type="checkbox"/> Cable T.V. | <input checked="" type="checkbox"/> Internet |
| <input checked="" type="checkbox"/> Newsletters | <input type="checkbox"/> Commercial T.V. | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Direct Mailings | <input type="checkbox"/> Trade Magazines | <input type="checkbox"/> Other (specify) |

- 8. Please provide specifics for any mechanical or electronic rides, demonstrations, displays, music, etc.(attach documents as necessary)

- 9. Services provided at the event:

| Service | Contact Name | Company | Address | Phone Number |
|-------------------------------|------------------|--------------------|---------|--------------|
| Sanitation/Portable Restrooms | Coleen Geary | Floods Royal Flush | | 224-325-9140 |
| Waste Disposal/Garbage | Waste Management | | | 866-909-4458 |
| Tents | | | | |
| Music | | | | |
| Other | | | | |

10. Provide a list of all vendors and their Illinois sales tax identification number. Provide each vendor with a notice or form indicating they are filing all sales occurring in the Village of Long Grove.

Sales tax rate for the Village of Long Grove is 8%.

Food vendors must contact the Lake County Department of Health (847-360-6700) to apply for a permit.

11. If a charity is involved or benefiting from this event, please provide the name of the charity, contact name and phone number.
12. Raffle – Submit “Application for License to Conduct Raffle.” The Village Board must approve the raffle before the event.*
13. Liquor – Submit the “Temporary Liquor License” Application. **Please note that a State of Illinois Liquor License is also required. Applications may be downloaded at www.illinois.gov/license.cfm.***

* For additional copies of the Event Application or to obtain an Application for a License to Conduct a Raffle or Temporary Liquor License Application, please visit the Village of Long Grove website at <http://www.longgroveil.gov>. Applications are under the heading “Forms/Permits” on the home page.

All the information submitted is as part of an application to the Long Grove Business and Community Partners to obtain their recommendation to the Village Board to hold a specific event in the B-1 Historic Business District. The event date is for the upcoming year and all of the information is accurate to the best of my knowledge.

Please read this form carefully and be aware that in signing up and participating in this event you will be waiving and releasing all claims arising out of this program. In consideration of the Village sponsoring and providing the above event and accepting me as a participant in the above event, I agree as follows:

ACKNOWLEDGEMENT/ASSUMPTION OF RISK OF INJURY

I have fully informed myself of all the details of the LGBCP event(s) and the risks inherent in the event. I recognize and acknowledge that they may involve risks of bodily injury and death. I agree to and assume the full risk of any injuries, including death, and of all costs, damages, and losses that I may sustain as a result of participating in any and all activities connected with or associated with such event.


WAIVER AND RELEASE OF CLAIMS FOR INJURY

I hereby agree to, and do waive, release, and relinquish all claims of every kind, known and unknown, present and future, that I may have against the Village of Long Grove, the Long Grove Business & Community Partners and their officers, agents, servants and employees, arising out of, connected with, or in any way related to, the event or my participation therein.

INDEMNITY AND DEFENSE

I hereby further agree to indemnify and hold harmless and defend the Village of Long Grove, the Long Grove Business & Community Partners and their officers, agents, servants and employees from any and all claims of every kind, known and unknown, present and future, that I may have arising out of, connected with, or in any way related to the program or my participation therein. My signature also allows the use of my photo for promotional purposes. My signature on this form indicates that I have read and understand the above Waiver and execute it of my own free will and without any reservation.

Signature of Applicant



Date

July 19, 23