A G E N D A THE FIFTH MEETING OF THE SPECIAL EVENTS COMMITTEE

COMMITTEE ROOM 304 CITY HALL

3:00 P.M.

AUGUST 7, 2019

DISCLOSURES OF INTEREST

MINUTES

Confirmation of the minutes of the meeting held on June 5, 2019.

PETITIONS AND COMMUNICATIONS

Flight 75 Fly-In, Drive-In Breakfast - COPA - September 8, 2019 Pages 2-7

Kirkin' O' the Tartan Parade – Knox Church – September 15, 2019 Pages 8-14

The Gift of Baby Elena – Amanda Zielinski – October 5, 2019 Pages 15-21

Santa Claus Parade – Optimist Club – November 16, 2019 Pages 22-27

Safety, Love and Butterfly Wings - VAWSEC - September 21, 2019 Pages 28-34

Overdose Awareness – SW Public Health – August 28, 2019 Pages 35-40

UNFINISHED BUSINESS

Upcoming Events

- St. Thomas Iron Horse Festival August 15-18, 2019
- Roots and Shoots Adventure Club Destination Church August 19-23, 2019
- Beef BBO Elgin Beef Farmers August 21, 2019
- St. Thomas Optimist Children's Festival September 14, 2019
- St. Thomas Trails Open Creating Connections September 14, 2019
- Railway City Road Races September 22, 2019

NEW BUSINESS

ADJOURNMENT

JUL 1 R 2019

4	JOL 1 1
SECTION 1: EVENT A	ND ORGANIZER INFORMATION City Clerks
Event Name:	C.O.P.A.Flight 75 FLY.IN, DRIVE-IN BREAKFAST
Date(s):	SEPT 8, 2019
Start Time:	08:30 End Time: 11:30
Location(s):	ST. THOMAS AIRPORT
Organizing Group:	CANADIAN OWNERS & PILOTS ASSOC
Contact Name #1:	IAN BASSON #2:
Street Address: 4	3622 SPARTA LN
Town/City:	ST. THOMAS Province: 6NT Postal Code: NSP 358
Phone Number #1:	519-631-7051 #2: 519-670.0972
Email Address:	ij basson @ outlook. com
Expected Attendance	e: 200 Number of Event Personnel/Volunteers: 18 ?
Location and numbe	r of washrooms in place: PORTABLE ON SITE
Location and Numbe	er of Parking Spaces: AS PER FIRPORT ?
Number of Accessible	e Washrooms: Number of Accessible Parking Spots:
Please describe your	specific event. Attach additional sheets as necessary. BREAKFAST
AVAILABLE	TO PILOIS & PASSENGERS WITHIN APPROX 150 M.
Public DRI	JE HUS WITH INTEREST IN AVIATION
SECTION 2: FOOD A	ND BEVERAGE
	of any kind be available at this event? Yes No O
it yes, you must noti	fy Southwestern Public Health at 519-631-9900 at least 2 weeks prior to the event.

SECTION 3	3: PERSONAL	SERVICES
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Will there be personal services of any kind offered to the public at this event If Yes, you must notify Southwestern Public Health at 519-631-9900 at least		
Personal services include but are not limited to barbering, manicures, pedicupiercing.	ures, esthetics,	tattooing and
SECTION 4: TENTS		
Will there be an indoor or tent covered area used for public assembly as par	t of the event? Yes 🗆	
If Yes, please specify the number and size of tents.	-	
If the tents are larger than $60m^2$ cumulatively, a building permit is required t Services. Please attach a copy of the Permit and provide the Permit Number		
Please note that Indoor or Tent covered areas for public assembly must comrequirements enforced by Southwestern Public Health. Please contact the Toinformation on how to meet these requirements.		
SECTION 5: SERVING OF ALCOHOL		
Will alcohol be consumed at the event? If Yes, you must review and meet the requirements of the City's Alcohol Poli Rec and Property Management Department for Special Events taking place of		rough the Parks,
You must also comply with the Alcohol and Gaming Commission of Ontario (responsible to notify and provide any pertinent information required under obtaining a Special Occasion Permit. You must adhere to the Liquor Licence ensure access is given to the Police and AGCO Inspectors for the purposes of copy of the liquor permit with this application. If utilizing the services of a calendorsements to provide off — premises beverage services, organizers shall confirming date/time/location/services as well as a copy of the establishment	the AGCO guid Act and its Reg f inspections. P aterer with all t supply a letter	elines for ulations and lease submit a he required from the licensee
The area where alcohol is being served has to have a 36" (0.9m) high barrier is a no staking policy in all of the City's Parks, Recreation and Property Mana		
SECTION 6: MUNICIPALLY SIGNIFICANT EVENT		
If you wish to apply for a "Special Occasion Permit," through the Alcohol and (AGCO), you must obtain a letter of approval from City Council, declaring you by submitting the request to the City Clerk's Department. Please note that sweeks.	ur event "muni	icipally significant"
Will you be requesting that City Council declare your event a "Municipally Si	_	
SECTION 7: MUSIC / NOISE	Yes 🗌	No 🔀
Will there be a concert or musical entertainment as part of the event?	Yes 🗌	No 🔀

If Yes, please note that the use of sound reproduction devices is authorized between the hours of 8:00 a.m. and 11:00 p.m. so long as the Police are satisfied that said devices are being "used in a reasonable manner" and not intolerably high. It is the responsibility of the organizers to obtain any applicable musical licencing through SOCAN for events not taking place in a City facility.

Please note that if utilizing a temporary stage structure, regulations are found under the Occupational Health and Safety Act and enforced by the Ministry of Labour. A resource document for event organizers can be found on the Special Event Permits page on the City of St. Thomas website.

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SECTI		×.	ALIMI	1371 &	31 >

Will there be a Petting Zoo or Animals at the If Yes, the Southwestern Public Health must are not permitted in the Animal Control By-Law must be approved by City Council. Plea Please note that such approval may take see	be notified of the ever Law 71-2011, an Applic se attach a copy of the	ation for Temp	orary Exemption	on to the By-
SECTION 9: ROAD CLOSURES / TRAFFIC FLO	OW CHANGES			
Are you anticipating any road closures or tra	affic flow changes?		Yes 🗌	No 🔀
If Yes, please describe the road closure requof Way Occupancy Permit and City Council approval may take several weeks.	approval is required for	all road closure	es. Please note	
Please attach a copy of the Right of Way Oc If the event is a Parade / Run / Walk / Pass to under the Special Events page on the City was	through Sporting Event	, please refer to	the city roads	map located
If the event is a Parade / Run / Walk / Pass to under the Special Events page on the City was a second control of the City was a sec	through Sporting Event	, please refer to	the city roads	map located
If the event is a Parade / Run / Walk / Pass	through Sporting Event rebsite. Describe the ev	, please refer to rent and attach	the city roads a map or sketo	map located ch.
If the event is a Parade / Run / Walk / Pass to under the Special Events page on the City was possible. Do you require traffic control? If Yes, please contact the St. Thomas Police PLEASE NOTE: Marshalls, volunteers and specan direct traffic pursuant to the Highway T	services at (519) 631-1 ecial event staff are no raffic Act.	, please refer to rent and attach 224 ext. 4177.	the city roads a map or sketo	map located ch.
If the event is a Parade / Run / Walk / Pass to under the Special Events page on the City was a parade on the City was a	services at (519) 631-1 ecial event staff are no raffic Act.	, please refer to rent and attach 224 ext. 4177.	the city roads a map or sketo	map located ch.

Page 4 of 7

SECTION 10: MUNICIPAL FACILITIES

For events taking place in Pinafore Park, or and Property Management staff once the S				
Have you contacted Parks and Recreation s			No □	N/A 🔀
Have you rented a pavilion/facility and sign	ed a permit?	Yes 🔲	No 🗌	N/A ⊠
If yes, please provide the location of the re	ntal and attach a copy o	f the permit		·
Do you require additional picnic tables or gand Property Management Dept and that d				
and Property Wanagement Dept and that a	icite (), pick op is the ve	Yes 🗆	No 🛮	N/A 🗆
If Yes, how many are you requesting? # o	of Picnic Tables:	# of Garb	age Cans:	
Have you made arrangements with Environ	mental Services staff fo	r recycling con	tainers and co	llection?
		Yes 🗌	No 🗌	N/A 🖾
Will you require municipal support for:	Water	Yes 🗌	No 🗹	N/A □
	Hydro	Yes 🗌	No 🔀	N/A □
If required, have you obtained a Hydrant Co			No □	
SECTION 11: ACCESSIBILITTY	•			_
As an event organizer, it is your responsi Accessibility for Ontarians with Disabilities requirements to meet for accessibility. displayed throughout the event venue to washrooms and parking. Although not requiplan to the Municipal Accessibility Advisory SECTION 12: OTHER SERVICES/RESOURCES	es Act (AODA). Organizes Please note that direct indicate the barrier-free uired, the Special Events or Committee for larger e	ations with a tional signage e path of trav Committee re	it least one e e needs to bo el and location ecommends su	mployee have e prominently n of accessible
SECTION 12. OTHER SERVICES/NESSOCIOES	•			
Security: Has a privately licenced security fi If Yes, what company and how many securi			Yes 🗌	No ⊠
First Aid: For events with an anticipated at	tendance of more than:	200 people, Fi	rst Aid service:	s are
required to be retained. Have you confirme	ed First Aid services?	Yes 🗆	No 🔼	N/A 🗆
If Yes, please attach documentation providi		ervices have be	en retained.	GU HAND
	Page 5 of 7	K/N	WILL IST	OL LIWIAN

Ambulance: Has Emergency Medical Services (Ambulance Service) been conta planned emergency access to the site?	cted regarding yo Yes □	ur event and No 🛭
Fireworks: Will there be fireworks as part of your event? If Yes, a permit for exhibition fireworks is required through the Fire Departmen	Yes □ t.	No 🗷
SECTION 13: SIGNATURE		
That the information contained in this application and any documentation, in provided in support of the application, by myself, my agents, consultants an information and will become part of the public record. As such, and in accordance Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, City of St. Thomas making this application and its supporting documentation a including copying and disclosing the application and its supporting documentation their request.	nd solicitors, constance with the prov c.M.56, I hereby co available to the ge	titutes public visions of the onsent to the eneral public,
(Signature of Individual Completing this Application) (Date	: completéd)	
Office Use Only: Application Received: July 18, 2019 Committee Approva	l:	

SECTION 14: INSURANCE

A Certificate of Insurance is required providing proof of \$5,000,000 in insurance coverage, including the naming of the City of St. Thomas as an Additional Insured under the corresponding policies. A copy of the required insurance MUST be submitted a minimum of two weeks prior to the start of the event. The Special Events Committee reserves the right to impose additional requirements and increased insurance coverage for large community events.

The provision of the completed and signed Statement of Indemnification below is also required.

Please note that an approved event may be cancelled should insurance coverage not be provided and may be altered or cancelled as a result of an emergency situation.

FLY-IN, DRIVE-IN BREAKFAST OFF	nized by $C.0.9.$	Corganizing Group)
(Event Name)		(Organizing Group)
shall indemnify and save harmless The Corporation law responsible from any and all liabilities, damage	÷	
any damage to property including loss of use the death resulting at any time there from, occasione		
ELY-IN DRIVE-IN GREAKFAST OFFI	nized by Co.R.A.	FIEHT 75
FLY-IN DRIVE - IN BREAKFAK organ (Event Name)		(Organizing Group)
damage or injury is due to the act, default or neg		use whatsoever, except where such ration of the City of St. Thomas, its
damage or injury is due to the act, default or neg officers, agents, servants, employees, contractors. Witness:	digence of The Corpor s, customers, invitees Signed:	ation of the City of St. Thomas, its or licensees.
damage or injury is due to the act, default or neg officers, agents, servants, employees, contractors	ligence of The Corpor s, customers, invitees	ation of the City of St. Thomas, its
damage or injury is due to the act, default or neg officers, agents, servants, employees, contractors. Witness:	digence of The Corpor s, customers, invitees Signed: Name (Print):	ation of the City of St. Thomas, its or licensees. AN BASSON
damage or injury is due to the act, default or neg officers, agents, servants, employees, contractors. Witness:	sligence of The Corpor s, customers, invitees Signed: Name (Print): Address:	IAN BASSON 43622 SPARTA LIN
damage or injury is due to the act, default or neg officers, agents, servants, employees, contractors. Witness:	sligence of The Corpor s, customers, invitees Signed: Name (Print): Address: Telephone:	AN BASSON 43622 SPARTA LIN 519-631-7051 Jul 19 2019
damage or injury is due to the act, default or neg officers, agents, servants, employees, contractors. Witness:	sligence of The Corpor s, customers, invitees Signed: Name (Print): Address: Telephone: Date: Event Name:	IAN BASSON 43622 SPARTA LIN 519-631-7051

CANADIAN GWYERS & PILOTS ASSOPAGE 7 OF 7

SECTION 1: EVENT AN	Kirkin' O' the Ta	· · · · · · · · · · · · · · · · · · ·	0-		CITY of	St. Thomas
Event Name:	Sunday Sept. 1	5, 2019				1 8 2019
Date(s):	10 AM			10:15 AM		Clerks Dept.
Start Time:						
Location(s):	parade from Pri	ncess Ave ar	nd Centre St.	to Knox Church		
Organizing Group:	Knox Church Ki	rkin' O' the T	artan Commi	ttee		
Contact Name #1:	Mary-Ellen Bolt		Johr	Lyle		
c/o Kr	nox Presbyterian				**	
Street Address:	St. Thomas		ON		N5R 3N9	
Town/City:	519 633-6435			Postal Code: 31-2414 church		
Phone Number #1:						
Email Address:	boltfam@rogers	s.com				
Expected Attendance:	100	Number of Eve	ent Personnel/\	10 Volunteers:		
Location and number of		at Knox	Church			
	or wasinoons in pr		···			
		At Knox Chu	_			
Location and Number	of Parking Spaces:					
	3				8	
Number of Accessible	_	Nur	nber of Accessi	ble Parking Spots:	0	
Please describe your sp	pecific event. Attac	h additional sh	eets as necess	агу		
Rolling parade from	NE corner of Ce	entre and Pri	ncess, south	on Princess to W	Vellington	St
west on Wellington	Street to Hinks S	Street and Kn	ox Church. F	Pipe band and ma	archers	
			30 1100			_
						and the same of th
SECTION 2: FOOD AND	BEVERAGE					
Will food/beverage of	any kind be availab	ole at this even	t?	Yes		No 🗹
If Yes, you must notify	Southwestern Pub	lic Health at 51	.9-631-9900 at	least 2 weeks prio	r to the eve	ent.

SECTION 3: PERSONAL SERVICES

Will there be personal services of any kind offered to the public at this event? f Yes, you must notify Southwestern Public Health at 519-631-9900 at least 2		No ☑ the event.
Personal services include but are not limited to barbering, manicures, pedicu piercing.	res, esthetics, t	attooing and
SECTION 4: TENTS		
Will there be an indoor or tent covered area used for public assembly as part	of the event?	No 🗹
f Yes, please specify the number and size of tents.		
f the tents are larger than 60m ² cumulatively, a building permit is required the Services. Please attach a copy of the Permit and provide the Permit Numbers		
Please note that Indoor or Tent covered areas for public assembly must comprequirements enforced by Southwestern Public Health. Please contact the Tonformation on how to meet these requirements.		
SECTION 5: SERVING OF ALCOHOL		
Will alcohol be consumed at the event? f Yes, you must review and meet the requirements of the City's Alcohol Polic Rec and Property Management Department for Special Events taking place o		
You must also comply with the Alcohol and Gaming Commission of Ontario (A responsible to notify and provide any pertinent information required under to obtaining a Special Occasion Permit. You must adhere to the Liquor Licence A resure access is given to the Police and AGCO Inspectors for the purposes of copy of the liquor permit with this application. If utilizing the services of a catendorsements to provide off — premises beverage services, organizers shall seconfirming date/time/location/services as well as a copy of the establishment.	he AGCO guide Act and its Regu inspections. Ple terer with all th upply a letter fr	lines for lations and ease submit a e required om the licensee
The area where alcohol is being served has to have a 36" (0.9m) high barrier/s a no staking policy in all of the City's Parks, Recreation and Property Mana		
SECTION 6: MUNICIPALLY SIGNIFICANT EVENT		
f you wish to apply for a "Special Occasion Permit," through the Alcohol and AGCO), you must obtain a letter of approval from City Council, declaring you by submitting the request to the City Clerk's Department. Please note that suweeks.	r event "munic	ipally significant'
Will you be requesting that City Council declare your event a "Municipally Sig	gnificant Event" Yes □	? No ☑
SECTION 7: MUSIC / NOISE	.00 [
Will there be a concert or musical entertainment as part of the event?	Yes 🗸	No 🗌

If Yes, please note that the use of sound reproduction devices is authorized between the hours of 8:00 a.m. and 11:00 p.m. so long as the Police are satisfied that said devices are being "used in a reasonable manner" and not intolerably high. It is the responsibility of the organizers to obtain any applicable musical licencing through SOCAN for events not taking place in a City facility.

Please note that if utilizing a temporary stage structure, regulations are found under the Occupational Health and Safety Act and enforced by the Ministry of Labour. A resource document for event organizers can be found on the Special Event Permits page on the City of St. Thomas website.

SECTION 8: ANIMALS

Will there be a Petting Zoo or Animals at the If Yes, the Southwestern Public Health must are not permitted in the Animal Control By Law must be approved by City Council. Please note that such approval may take se	st be notified of the ever -Law 71-2011, an Applic ase attach a copy of the	ation for Temp	orary Exempti	on to the By-
SECTION 9: ROAD CLOSURES / TRAFFIC FL	OW CHANGES			
Are you anticipating any road closures or t	raffic flow changes?		Yes 🗹	No 🔲
If Yes, please describe the road closure req of Way Occupancy Permit and City Council approval may take several weeks. No roa		•	_	
Rolling marching parade. Participants	s can be easily moved	d aside		
if the roadway is required for an emer	gency.			123 O M
Please attach a copy of the Right of Way O If the event is a Parade / Run / Walk / Pass under the Special Events page on the City v Parade from the NE corner of Princes	through Sporting Event, website. Describe the ev	, please refer to ent and attach	the city roads a map or sketo	-
West on Wellington St. to Hinks Stree	et and Knox Church			
Do you require traffic control?			Yes ☑	—— No □
If Yes, please contact the St. Thomas Police	Services at (519) 631-1	224 ext. 4177.	_	
PLEASE NOTE: Marshalls, volunteers and sp can direct traffic pursuant to the Highway ¹ Have you contacted the Env Services Depar	Traffic Act.		ect traffic. Onl	y the police
,	Barricades No Parking Signs Detour Signing	Yes 🗌 Yes 🔲 Yes 🔲	No 🗌 No 🗍 No 🗍	N/A 🗹 N/A 🗹 N/A 🔽

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SECTION 10: MUNICIPAL FACILITIES

ror events taking place in Pinatore Park and Property Management staff once th	_	-	_	*
Have you contacted Parks and Recreation		Yes 🗌	No 🗌	N/A 🗹
Have you rented a pavilion/facility and	signed a permit?	Yes 🗌	No 🗌	N/A 🗹
If yes, please provide the location of the	e rental and attach a copy of	the permit		
Do you require additional picnic tables of and Property Management Dept and the				
If Yes, how many are you requesting?	# of Picnic Tables:	# of Garl	page Cans:	
Have you made arrangements with Envi	ironmental Services staff for	r recycling cor Yes	ntainers and col No 🔲	lection? N/A ☑
Will you require municipal support for:	Water Hydro	Yes 🔲 Yes 🔲	No 🗌 No 🗎	N/A ☑ N/A ☑
Please note that all equipment and exterest certification body under the Ontario Example Authority. If required, please attach the Number:	lectrical Safety Code or hav	ve been inspe	ected by the Ele	ectrical Safety
If required, have you obtained a Hydran	t Connection Permit?	Yes 🗌	No 🔲	N/A 🗹
If Yes, please attach a copy of the Permi	t and provide the Permit Nu	ımber:		_
SECTION 11: ACCESSIBILITTY				
As an event organizer, it is your responses an event organizer, it is your responses and contact with Disability for Ontarians with Disability accessibility and the event venue washrooms and parking. Although not replan to the Municipal Accessibility Advisor	lities Act (AODA). Organizely. Please note that direct to indicate the barrier-free equired, the Special Events	ations with a tional signage path of trav Committee re	at least one er e needs to be rel and location ecommends sul	mployee have prominently of accessible
SECTION 12: OTHER SERVICES/RESOUR	<u>CES</u>			
Security: Has a privately licenced securit If Yes, what company and how many sec			Yes 🔲	No ☑
First Aid: For events with an anticipated required to be retained. Have you confirm the confirmation provides attach documentation provides.	med First Aid services?	Yes 🗌	No 🔲	are N/A 🗹

-12 – Ambulance: Has Emergency Medical Services (Ambulance Service) been contacted regarding your event and planned emergency access to the site? Yes 🗌 No 🔽 Fireworks: Will there be fireworks as part of your event? No 🗹 Yes 🔲

If Yes, a permit for exhibition fireworks is required through the Fire Department.

SECTION 13: SIGNATURE

That the information contained in this application and any documentation, including reports, and drawings, provided in support of the application, by myself, my agents, consultants and solicitors, constitutes public information and will become part of the public record. As such, and in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.M.56, I hereby consent to the City of St. Thomas making this application and its supporting documentation available to the general public, including copying and disclosing the application and its supporting documentation to any third parties upon their request.

(Signature of Individual Completing this Application)

(Date completed)

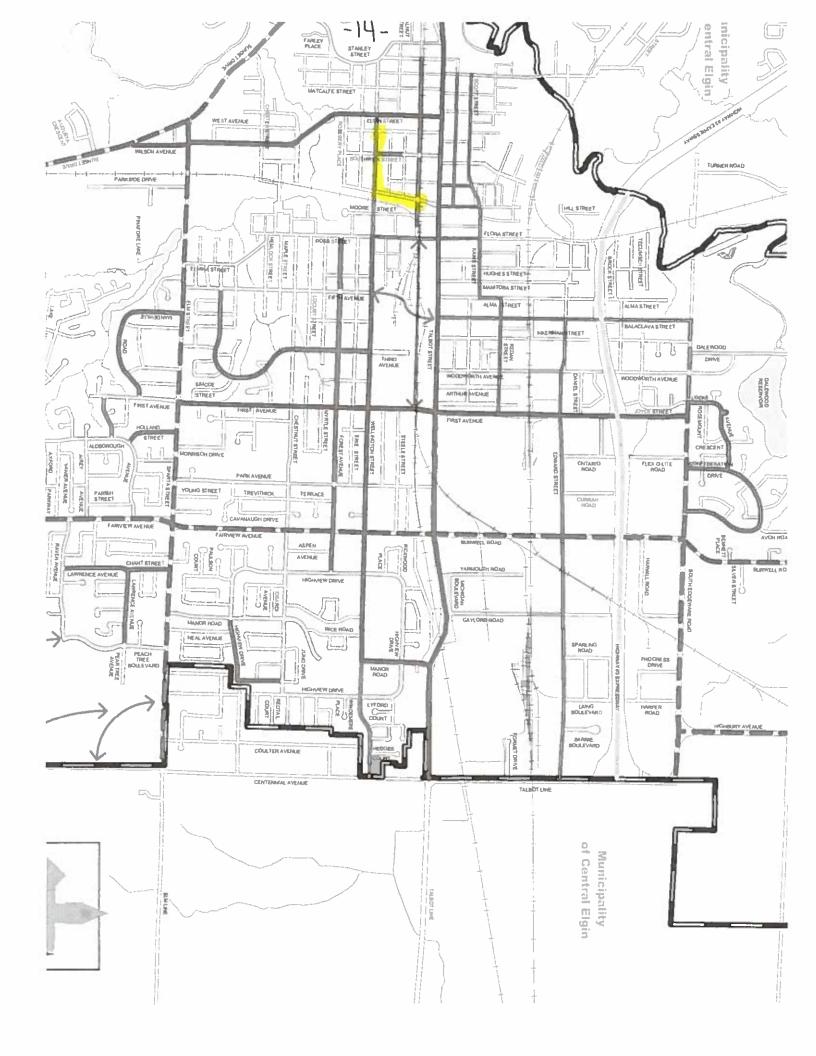
Office Use Only: Application Received: _______ Committee Approval: ______

A Certificate of Insurance is required providing proof of \$5,000,000 in insurance coverage, including the naming of the City of St. Thomas as an Additional Insured under the corresponding policies. A copy of the required insurance MUST be submitted a minimum of two weeks prior to the start of the event. The Special Events Committee reserves the right to impose additional requirements and increased insurance coverage for large community events.

The provision of the completed and signed Statement of Indemnification below is also required.

Please note that an approved event may be cancelled should insurance coverage not be provided and may be altered or cancelled as a result of an emergency situation.

STATEMENT OF INDEMNIFICATION		
Kirkin' O' the Tartan parade		n Kirkin' Committee
(Event Name)		(Organizing Group)
shall indemnify and save harmless The Corporation law responsible from any and all liabilities, damages	•	
any damage to property including loss of use thered death resulting at any time there from, occasioned		-
Kirkin' O' the Tartan	Knox Kirkin' C	Committee
(Event Name) organize	ed by	(Organizing Group)
its officers, agents, servants, employees, contractor the premises or any part thereof arising from or occ damage or injury is due to the act, default or neglig officers, agents, servants, employees, contractors, of the servants.	casioned by any cause ence of The Corporati	whatsoever, except where such ion of the City of St. Thomas, its
Name (Print): Mel Knapp.	Name (Print):	
•	Address:	6297 Highland Lane, Union
	Telephone:	519 633-6435
	Date:	18 June 2019
	Event Name:	Kirkin' O' the Tartan Parade
	Organizing Group:	Knox church St. Thomas
	Event Dates:	Sunday Sept. 15, 2019



SECTION 1: EVENT	AND ORGANIZER INFORMATION Walk
Event Name:	The Gift of Boby Elena - 5K run
Date(s):	October 5th, 2019
Start Time:	8am End Time: 1pm
Location(s):	Pinafore Park
Organizing Group:	The Gift of Baby Elena
Contact Name #1:	Amanda Ziclinsti #2:
Street Address: 4	1517 Major Line
Town/City:	St. Thomas Province: ON Postal Code: NSP 4423
Phone Number #1:	519-694-5246 #2:
Email Address:	azielinstize notmail.com
Expected Attendance	: 156 Number of Event Personnel/Volunteers: 55
Location and number	of washrooms in place: USC of main public
washroom	ms - no others needed.
Location and Number	of Parking Spaces:

Number of Accessible	Washrooms: Number of Accessible Parking Spots:
Please describe your s	pecific event. Attach additional sheets as necessary.
	23,2018, we lost our 6 week old
	Elena as a result of SIDS. The heroic
efforts u	shile trying to save our daughter's
life at H	re St. Thomas Elgin General Hospital
and by lo	cal first responders who came to
SECTION 2: FOOD AND	
	any kind be available at this event? Elgin St. Thomas Public Health at 519-631-9900 at least 2 weeks prior to the event.

our aid the night she passed away have lead us to wanting to give back to our community.

community.

Infant loss affects I in 4 families, through nis carriage, still birth or infant loss. October s Infant Loss Awareness month. Last year re held our innaugural Gift of Baby Elena 5K at Pinafore Park, where we raised close o 4,000.00 (after expenses) to put towards creating comfort boxes that have been mailed ill over Canada, for families who have lost a hild or infant, as well as 5 kits for the 3TEGH to provide to families in the moment. I total of 22 kits have been distributed, s well as 2 owlet heart monitors for amilies who have experienced a loss and are aving a baby following this loss. Owlet's ost approximate 350.00-400.00 and can ovide a piece of mind.

This year, any proceeds from our sk will go towards the comfort boxes, srchaving 2-4 owlet monitors, and a cash irchaving to STEGH, Neo-natal unit, hopefully longition to STEGH, Neo-natal unit, hopefully or an infant transporter (if one has not been rchased) or whatever is needed. [Please find The Gift of Baby Elena on Facility

Thank you, Amanda Zielinski info.

-17-

SECTION 3: PERSONAL SERVICES

Will there be personal services of any kind offered to the public at this event? Yes If Yes, you must notify Elgin St. Thomas Public Health at 519-631-9900 at least 2 weeks prior to	No 🛂
Personal services include but are not limited to barbering, manicures, pedicures, esthetics, tat piercing.	tooing and
SECTION 4: TENTS	
Will there be an indoor or tent covered area used for public assembly as part of the event?	
If Yes, please specify the number and size of tents	No 🔽
If the tents are larger than 60m ² cumulatively, a building permit is required through Planning & Services. Please attach a copy of the Permit and provide the Permit Number:	Building
Please note that Indoor or Tent covered areas for public assembly must comply with Smoke Fre requirements enforced by Elgin St Thomas Public Health. Please contact the Tobacco Enforcem information on how to meet these requirements.	e Ontario Act ent Officer for
SECTION 5: SERVING OF ALCOHOL	
Will alcohol be consumed at the event? If Yes, you must review and meet the requirements of the City's Alcohol Policy available through Rec and Property Management Department for Special Events taking place on municipal property.	
You must also comply with the Alcohol and Gaming Commission of Ontario (AGCO). Event organ responsible to notify and provide any pertinent information required under the AGCO guideline obtaining a Special Occasion Permit. You must adhere to the Liquor Licence Act and its Regulation ensure access is given to the Police and AGCO Inspectors for the purposes of inspections. Please copy of the liquor permit with this application. If utilizing the services of a caterer with all the re endorsements to provide off — premises beverage services, organizers shall supply a letter from confirming date/time/location/services as well as a copy of the establishments' endorsement.	s for ons and submit a quired
The area where alcohol is being served has to have a 36" (0.9m) high barrier/partition. Please no is a no staking policy in all of the City's Parks, Recreation and Property Management facilities.	te that there
SECTION 6: MUNICIPALLY SIGNIFICANT EVENT	
If you wish to apply for a "Special Occasion Permit," through the Alcohol and Gaming Commissio (AGCO), you must obtain a letter of approval from City Council, declaring your event "municipally by submitting the request to the City Clerk's Department. Please note that such approval may talweeks.	y significant",
Will you be requesting that City Council declare your event a "Municipally Significant Event"?	_/
Yes ☐ No [4
Will there be a concert or musical entertainment as part of the event?	

If Yes, please note that the use of sound reproduction devices is authorized between the hours of 8:00 a.m. and 11:00 p.m. so long as the Police are satisfied that said devices are being "used in a reasonable manner" and not intolerably high. It is the responsibility of the organizers to obtain any applicable musical licencing through SOCAN for events not taking place in a City facility.

Please note that if utilizing a temporary stage structure, regulations are found under the Occupational Health and Safety Act and enforced by the Ministry of Labour. A resource document for event organizers can be found on the Special Event Permits page on the City of St. Thomas website.

SECTION 8: ANIMALS		
Will there be a Petting Zoo or Animals at the event? If Yes, the Elgin-St. Thomas Public Health must be notified of the event details to are not permitted in the Animal Control By-Law 71-2011, an Application for Ten Law must be approved by City Council. Please attach a copy of the application to Please note that such approval may take several weeks.	nporary Exemp	tion to the By-
SECTION 9: ROAD CLOSURES / TRAFFIC FLOW CHANGES		
Are you anticipating any road closures or traffic flow changes?	Yes □	No 🖫
If Yes, please describe the road closure requirement and attach a map or sketch of Way Occupancy Permit and City Council approval is required for all road closu approval may take several weeks.	res. Please not	osure. A Right e that ———
Please attach a copy of the Right of Way Occupancy Permit and provide the permit the event is a Parade / Run / Walk / Pass through Sporting Event, please refer to under the Special Events page on the City website. Describe the event and attach	o the city roads	s map located
3 laps will Pinafore Park to	make	a
3 laps with Pinafore Park to, 5 Km, using the path ways + park roads safely	arting	10+1
Do you require traffic control? If Yes, please contact the St. Thomas Police Services at (519) 631-1224 ext. 141. PLEASE NOTE: Marshalls, volunteers and special event staff are not allowed to dire	Yes 🗆	No 🖳
i erose ito i.e. Maisilans, volunteers and special event starr are not allowed to dire	ect tramic. Unly	tne police

Page 4 of 7

No Parking Signs

Detour Signing

Yes 🔲

Yes 🔲

Yes 🗌

No 🔲

No 🖂

No 🔲

Barricades

can direct traffic pursuant to the Highway Traffic Act. Have you contacted the Public Works Department for:

SECTION 10: MUNICIPAL FACILITIES

For events taking place in Pinafore Parand Property Management staff once	rk, organizers will need to	arrange an ons	ite meeting wit	h Parks, Rec
and Property Management staff once Have you contacted Parks and Recreat	tion staff about your even	t? Yes	No No	d. N/A 🗌
Have you rented a pavilion/facility and	signed a permit?	Yes	No Am	N/A □
If yes, please provide the location of th	e rental and attach a cop	y of the permit.	dance 7	noiliux
Do you require picnic tables or garbage Property Management Dept and that d	e cans? Please note availa	bility is at the di	scretion of the	Parks, Rec and
į.	, , , , , , , , , , , , , , , , , , ,	Yes 🗌	No X	N/A 🗆
If Yes, how many are you requesting? What ever is Have you made arrangements with Env	# of Picnic Tables: auailable in ironmental Services staff	# of Gar PCUITE for recycling con Yes []	ntainers and co	llection?
		res []	No 🗀	N/A 🗹
Will you require municipal support for:	Water Hydro	Yes ☐ Yes ☐	No □ No □	N/A 🖭
certification body under the Ontario El Authority. If required, please attach th Number: If required, have you obtained a Hydrant	e Electrical Safety Autho	rity documenta Yes	tion and provid	de the Permit
If Yes, please attach a copy of the Permit	and provide the Permit I	Number:		
SECTION 11: ACCESSIBILITTY				
As an event organizer, it is your responded to the Accessibility for Ontarians with Disability requirements to meet for accessibility displayed throughout the event venue to washrooms and parking. Although not replan to the Municipal Accessibility Advisor	ties Act (AODA). Organi . Please note that dire o indicate the barrier-fre quired, the Special Event	zations with at ctional signage e path of trave s Committee rec	least one em needs to be and location commends sub-	prominently of accessible
SECTION 12: OTHER SERVICES/RESOURCE	ES			
Security: Has a privately licenced security If Yes, what company and how many security			Yes 🗌	No 🗹
First Aid: For events with an anticipated a required to be retained. Have you confirm If Yes, please attach documentation provides	ed First Aid services?	Yes □	No 🔲	re N/A 🏻

	- 90-			
Ambulance: Has Emergency Medical Services (Applanned emergency access to the site?	Ambulance	e Service) been contacted なみ.	regarding your Yes □	event and No
Fireworks: Will there be fireworks as part of you If Yes, a permit for exhibition fireworks is require	r event? ed througi	h the Fire Department.	Yes 🗌	No 🗓
SECTION 13: SIGNATURE				
That the information contained in this application provided in support of the application, by mystinformation and will become part of the public of Municipal Freedom of Information and Protection City of St. Thomas making this application and it including copying and disclosing the application their request.	elf, my ag record. As <i>n of Privac</i> ts support	ents, consultants and soli such, and in accordance v cy Act, R.S.O. 1990, c.M.56 ing documentation availab	icitors, constitute with the provision of the constitution of the	tes public ons of the ent to the
(Signature of Individual Completing this Application		Date comp		,
Office Use Only: Application Received: July 9, 6	_PKK	_ Committee Approval:		

SECTION 14: INSURANCE

A Certificate of Insurance is required providing proof of \$5,000,000 in insurance coverage, including the naming of the City of St. Thomas as an Additional Insured under the corresponding policies. A copy of the required insurance MUST be submitted a minimum of two weeks prior to the start of the event. The Special Events Committee reserves the right to impose additional requirements and increased insurance coverage for large community events.

The provision of the completed and signed Statement of Indemnification below is also required.

Please note that an approved event may be cancelled should insurance coverage not be provided and may be altered or cancelled as a result of an emergency situation.

ידי	STATEMENT C	OF INDEMNIFICATION	ba					
Ki	WELT/RUN	for Infant L		nized by <u>W</u>	vc B	iff of Babu	Elena	
/		(Event Name)	CONTINUES S			(Organizing Group)	·	
	shall indemnifi	y and save harmless i e from any and all lia	The Corporation	of the City o	of St. Tha	mas and all persons for or actions arising out o	· whom it is at	
	death resulting	property including it at any time there fr	oss of use there om, occasioned	of, and any ii by any act o	njury to a r omissio	any person or persons, i	ncluding	
7	11		(, organiz	ed by Am	and	Felionia (of The	SI-f
		(Event Name)		w/ <u>1-1(11)</u>	CI.ICAI	(Organizing Group)	EIC	nd
	its officers, age	nts, servants, employ	ees, contracto	rs, customers	, invitee:	s or licensees, or occurr	ing in or on	
	damage or inju	r any part thereof ari ry is due to the act, d	sing from or oc efault or neglig	casioned by a ence of The (iny cause Corporati	whatsoever, except who of the City of St. The	nere such omas, its	
	officers, agents	, servants, employee	s, contractors, o	customers, in	vitees or	licensees.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Witness:	MANAPP		Signed:	0	Qualinal.	_	
	Name (Print):	Mel Kno	AP-	Name (Prir	nt):	Amanda Z	iclinski	
				Address:	Į.	+1517 Major	Line	
				Telephone	: (519-694-524	+6	
				Date:		July 9 120	19_	
				Event Name	e: (5km Walk/F	run for	
				Organizing	Group: _	The GIFT of I	3aby Elo	n
				Event Dates	s: (October 5/	12019	

SECTION 1: EVENT AND ORGANIZER INFORMATION

Event Name:	OPTIMIST CLUB OF ST. THOMAS SANTA CLAUS PARADE
Date(s):	SATURDAY NOVEMBER 16, 2019
Start Time:	1800 HRS End Time: APPROX. 2100 HRS.
Location(s):	TALBOT ST. FROM FIRST AVE TO ELGINST.
Organizing Group:	OPTIMIST CLUB of ST. THOMAS
Contact Name #1:	BOB JACKSON #2:
Street Address:	06 ELM ST.
Town/City:	ST. THOMAS Province: ON Postal Code: NSRIKT
Phone Number #1:	519-633-1123 #2:
Email Address:	bobsue 606 @ yahoo. com
Expected Attendance	: 12,000 Number of Event Personnel/Volunteers: UNKNOWN
Location and number	of washrooms in place:
Location and Number	of Parking Spaces: NA
Number of Accessible	Washrooms: N/A Number of Accessible Parking Spots: N/A
	specific event. Attach additional sheets as necessary.
IT'S THE !	ANNUAL SANTA CLAUS PARANE WITH FLOATS
BANDS DAN	ICERS REPRESENTING ORGANIZATIONS FROM
	INITY

SECTION 2: FOOD AND BEVERAGE

Will food/beverage of any kind be available at this event? Yes ☐ No ☑ If Yes, you must notify Southwestern Public Health at 519-631-9900 at least 2 weeks prior to the event.

SECTION 3: PERSONAL SERVICES

Will there be personal services of any kind offered to the public at this even If Yes, you must notify Southwestern Public Health at 519-631-9900 at least		
Personal services include but are not limited to barbering, manicures, pedic piercing.	ures, esthetics,	tattooing and
SECTION 4: TENTS		
Will there be an indoor or tent covered area used for public assembly as par	rt of the event? Yes	,
If Yes, please specify the number and size of tents.		
If the tents are larger than 60m^2 cumulatively, a building permit is required to Services. Please attach a copy of the Permit and provide the Permit Number		
Please note that Indoor or Tent covered areas for public assembly must comrequirements enforced by Southwestern Public Health. Please contact the Trinformation on how to meet these requirements.		
SECTION 5: SERVING OF ALCOHOL		
Will alcohol be consumed at the event? If Yes, you must review and meet the requirements of the City's Alcohol Poli Rec and Property Management Department for Special Events taking place of	Yes [icy available thr on municipal pr	ough the Parks,
You must also comply with the Alcohol and Gaming Commission of Ontario (responsible to notify and provide any pertinent information required under obtaining a Special Occasion Permit. You must adhere to the Liquor Licence ensure access is given to the Police and AGCO Inspectors for the purposes of copy of the liquor permit with this application. If utilizing the services of a calendorsements to provide off — premises beverage services, organizers shall sconfirming date/time/location/services as well as a copy of the establishment	the AGCO guide Act and its Rege finspections. Platerer with all the supply a letter f	elines for ulations and lease submit a ne required from the licensee
The area where alcohol is being served has to have a 36" (0.9m) high barrier is a no staking policy in all of the City's Parks, Recreation and Property Mana	/partition. Plea agement faciliti	se note that there es.
SECTION 6: MUNICIPALLY SIGNIFICANT EVENT		
If you wish to apply for a "Special Occasion Permit," through the Alcohol and (AGCO), you must obtain a letter of approval from City Council, declaring you by submitting the request to the City Clerk's Department. Please note that su weeks.	ur event "munic	ipally significant".
Will you be requesting that City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipally Signature of the City Council declare your event a "Municipal of the Ci		3
SECTION 7: MUSIC / NOISE	Yes 🗍	No ☑
Will there be a concert or musical entertainment as part of the event?	Yes 🗹	No 🗆

If Yes, please note that the use of sound reproduction devices is authorized between the hours of 8:00 a.m. and 11:00 p.m. so long as the Police are satisfied that said devices are being "used in a reasonable manner" and not intolerably high. It is the responsibility of the organizers to obtain any applicable musical licencing through SOCAN for events not taking place in a City facility.

Please note that if utilizing a temporary stage structure, regulations are found under the Occupational Health and Safety Act and enforced by the Ministry of Labour. A resource document for event organizers can be found on the Special Event Permits page on the City of St. Thomas website.

Touris of the special archer of this page of the only of our mornes we			
SECTION 8: ANIMALS			
Will there be a Petting Zoo or Animals at the event? If Yes, the Southwestern Public Health must be notified of the event dare not permitted in the Animal Control By-Law 71-2011, an Application Law must be approved by City Council. Please attach a copy of the appreciate note that such approval may take several weeks.	etails two weeks on for Temporary	Exemption t	o the By-
SECTION 9: ROAD CLOSURES / TRAFFIC FLOW CHANGES			
Are you anticipating any road closures or traffic flow changes?	_ Ye	s 🗹	No 🗌
If Yes, please describe the road closure requirement and attach a map of Way Occupancy Permit and City Council approval is required for all approval may take several weeks. FIRST AVE FROM TALBO	road closures. Ple	ase note tha	it
ALLLANES EXCEPT FURTHEST EAST LAND FROM FIRST AVE TO ELGIN ST.	E AND TH	41B07 S	T.
FROM FIRST AVE TO ELGIN ST.			
Please attach a copy of the Right of Way Occupancy Permit and provid	le the permit #:		
If the event is a Parade / Run / Walk / Pass through Sporting Event, ple under the Special Events page on the City website. Describe the event	ease refer to the c and attach a map	ity roads ma or sketch.	p located
Do you require traffic control? If Yes, please contact the St. Thomas Police Services at (519) 631-1224	Yes	✓	 No □
If Yes, please contact the St. Thomas Police Services at (519) 631-1224	ext. 4177. spok	to Staff	& Agt Boga
PLEASE NOTE: Marshalls, volunteers and special event staff are not allo can direct traffic pursuant to the Highway Traffic Act.	owed to direct tra		
Have you contacted the Env Services Department - Roads and Transpor	ration for:		
Barricades Y	es 🗹 No		N/A □

No Parking Signs

Dotour Cianina

Yes 🗌

N/A 🔲

NI/A 🖂

Rec

SECTION 10: MUNICIPAL FACILITIES

For events taking place in Pinafore Park, and Property Management staff once the	-	_	_	
Have you contacted Parks and Recreation			No 🗌	N/A ☑
Have you rented a pavilion/facility and si	gned a permit?	Yes 🗀	No 🗌	N/A☑
If yes, please provide the location of the	rental and attach a copy of	f the permit		· ·
Do you require additional picnic tables or	-	500		
and Property Management Dept and tha	t delivery/pick up is the re	Yes M	_	nizer. N/A □
If Yes, how many are you requesting?	of Picnic Tables:	# of Garb	page Cans: 2	,0
Have you made arrangements with Envir	onmental Services staff for			
		Yes 🗌	No 🔽	N/A 🗌
Will you require municipal support for:	Water Hydro	Yes ☐ Yes ☐	No ☑ No ☑	N/A □ N/A □
certification body under the Ontario Ele Authority. If required, please attach the Number:	Electrical Safety Authorit	•	•	•
If Yes, please attach a copy of the Permit	and provide the Permit Nu	ımber:		-
SECTION 11: ACCESSIBILITTY				
As an event organizer, it is your respon Accessibility for Ontarians with Disabili requirements to meet for accessibility displayed throughout the event venue to washrooms and parking. Although not replan to the Municipal Accessibility Advison SECTION 12: OTHER SERVICES/RESOURCES	ties Act (AODA). Organiza . Please note that direct o indicate the barrier-free quired, the Special Events ary Committee for larger ev	ations with a tional signage path of trave Committee re	t least one en e needs to be el and location commends sub	nployee have prominently of accessible
SECTION 12: OTHER SERVICES/RESOURCE	<u> </u>			A
Security: Has a privately licenced security if Yes, what company and how many secu		ned? t?	Yes 🗌	No 🗹
First Aid: For events with an anticipated a required to be retained. Have you confirm five please attach documentation provides.	ned First Aid services?	Yes 🗹	No 🗌	are N/A 🛮

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a de la companya de		
Ambulance: Has Emergency Medical Services (Ambulance Service) been contacted planned emergency access to the site?	regarding your Yes 🗹	event and No □
Fireworks: Will there be fireworks as part of your event? If Yes, a permit for exhibition fireworks is required through the Fire Department.	Yes 🗌	No 🗹
SECTION 13: SIGNATURE		
That the information contained in this application and any documentation, including provided in support of the application, by myself, my agents, consultants and so information and will become part of the public record. As such, and in accordance Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.M.S. City of St. Thomas making this application and its supporting documentation available including copying and disclosing the application and its supporting documentation their request.	licitors, constitu with the provisi 6, I hereby cons able to the gene	ites public ions of the sent to the eral public,
(Signature of Individual Completing this Application)	5/2019 pleted)	
Office Use Only: Application Received: July Committee Approval:		

SECTION 14: INSURANCE

A Certificate of Insurance is required providing proof of \$5,000,000 in insurance coverage, including the naming of the City of St. Thomas as an Additional Insured under the corresponding policies. A copy of the required insurance MUST be submitted a minimum of two weeks prior to the start of the event. The Special Events Committee reserves the right to impose additional requirements and increased insurance coverage for large community events.

The provision of the completed and signed Statement of Indemnification below is also required.

Please note that an approved event may be cancelled should insurance coverage not be provided and may be altered or cancelled as a result of an emergency situation.

STATEMENT OF INDEMNIFICATION		
(Event Name)	zed by <u>DPTIMI</u>	(Organizing Group)
shall indemnify and save harmless The Corporation law responsible from any and all liabilities, damages	•	•
any damage to property including loss of use there death resulting at any time there from, occasioned		• • • •
OPTIMIST SANTA CLAUS PARASE organize (Event Name)	ed by <u>OPTIMIST</u>	(Organizing Group)
its officers, agents, servants, employees, contractor the premises or any part thereof arising from or occ damage or injury is due to the act, default or negligon officers, agents, servants, employees, contractors, of	casioned by any cause ence of The Corporat	e whatsoever, except where such tion of the City of St. Thomas, its
Witness:	Signed:	but Jackson
Name (Print): Check Teconul	Name (Print):	ROBERT J. JACKSON
	Address:	606 ELM ST. ST. THOMAS
	Telephone:	519-633-1/23
	Date:	July 15/2019
	Event Name:	DPTIMIST SANTA CLAUS VARADE
	Organizing Group:	1 1
	Event Dates:	NOV. 16/2019

SECTION 1: EVENT AND ORGANIZER INFORMATION

Event Name:	Safety, Love, & Butterfly Wings			
Date(s):	Saturday September 21st 2019			
Start Time:	1:30pm Send Time: 3pm			
Location(s):	Lion's Club Celebration			
Organizing Group:	Violence Against Women Services Elgin County			
Contact Name #1:	Liz Brown #2:			
Street Address: 300	Talbot Street, Suite 26			
Town/City:	St. Thomas Province: ON Postal Code: N5P4E2			
Phone Number #1:	519.633.0155			
Email Address:	lbrown@vawsec.on.ca			
Expected Attendance:	Number of Event Personnel/Volunteers: 12			
	of washrooms in place: as provided in the park			
Location and Number of	of Parking Spaces:			
Number of Accessible \	Washrooms: Number of Accessible Parking Spots:			
Please describe your sp	pecific event. Attach additional sheets as necessary			
Please see a	ttached			
SECTION 2: FOOD AND	BEVERAGE			
	any kind be available at this event? Southwestern Public Health at 519-631-9900 at least 2 weeks prior to the event.			

SECTION 3: PERSONAL SERVICES

Will there be personal services of any kind offered to the public at this event? If Yes, you must notify Southwestern Public Health at 519-631-9900 at least 2	Yes 🗌 weeks prior to	No ☑ the event.
Personal services include but are not limited to barbering, manicures, pedicure piercing.	es, esthetics, ta	attooing and
SECTION 4: TENTS		
Will there be an indoor or tent covered area used for public assembly as part of	of the event?	No ☑
If Yes, please specify the number and size of tents.	163 (4)	
If the tents are larger than $60m^2$ cumulatively, a building permit is required the Services. Please attach a copy of the Permit and provide the Permit Number:		
Please note that Indoor or Tent covered areas for public assembly must complete requirements enforced by Southwestern Public Health. Please contact the Tob information on how to meet these requirements.	ly with Smoke pacco Enforcen	Free Ontario Act nent Officer for
SECTION 5: SERVING OF ALCOHOL		
Will alcohol be consumed at the event? If Yes, you must review and meet the requirements of the City's Alcohol Policy Rec and Property Management Department for Special Events taking place on	Yes vavailable thro municipal pro	No ☑ ough the Parks, perty.
You must also comply with the Alcohol and Gaming Commission of Ontario (A responsible to notify and provide any pertinent information required under the obtaining a Special Occasion Permit. You must adhere to the Liquor Licence Accensure access is given to the Police and AGCO Inspectors for the purposes of it copy of the liquor permit with this application. If utilizing the services of a cate endorsements to provide off — premises beverage services, organizers shall su confirming date/time/location/services as well as a copy of the establishment	e AGCO guidel at and its Regul nspections. Ple erer with all the pply a letter fr	lines for lations and ease submit a e required om the licensee
The area where alcohol is being served has to have a 36" (0.9m) high barrier/g is a no staking policy in all of the City's Parks, Recreation and Property Manag	partition. Pleas ement facilitie	e note that there s.
SECTION 6: MUNICIPALLY SIGNIFICANT EVENT		
If you wish to apply for a "Special Occasion Permit," through the Alcohol and (AGCO), you must obtain a letter of approval from City Council, declaring your by submitting the request to the City Clerk's Department. Please note that sucweeks.	event "munic	ipally significant"
Will you be requesting that City Council declare your event a "Municipally Sign	nificant Event" Yes 🔲	? No ☑
SECTION 7: MUSIC / NOISE		
Will there be a concert or musical entertainment as part of the event?	Yes 🗌	No 🗹

If Yes, please note that the use of sound reproduction devices is authorized between the hours of 8:00 a.m. and 11:00 p.m. so long as the Police are satisfied that said devices are being "used in a reasonable manner" and not intolerably high. It is the responsibility of the organizers to obtain any applicable musical licencing through SOCAN for events not taking place in a City facility.

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Will there be a Petting Zoo or Animals at the If Yes, the Southwestern Public Health must are not permitted in the Animal Control B. Law must be approved by City Council. Please note that such approval may take so	ist be notified of the eve y-Law 71-2011, an Applic ease attach a copy of the	cation for Temp	orary Exemption	on to the By-
SECTION 9: ROAD CLOSURES / TRAFFIC FI	LOW CHANGES			
Are you anticipating any road closures or	traffic flow changes?		Yes 🗌	No 🗸
If Yes, please describe the road closure re- of Way Occupancy Permit and City Counci approval may take several weeks.	il approval is required for	r all road closur	es. Please note	sure. A Right that —
			74 AL.	
Please attach a copy of the Right of Way C If the event is a Parade / Run / Walk / Pas under the Special Events page on the City	s through Sporting Event	r, please refer to	the city roads	map located
Do you require traffic control? If Yes, please contact the St. Thomas Police	e Services at (519) 631-1	1224 ext. 4177.	Yes 🗌	No 🗹
PLEASE NOTE: Marshalls, volunteers and scan direct traffic pursuant to the Highway	Traffic Act.		ect traffic. Onl	y the police
Have you contacted the Env Services Department	artment - Roads and Trai Barricades	Yes 🗍	No 🗀	N/A ☑
	No Parking Signs	Yes 🔲	No 🗆	N/A 🗹
	Detour Signing	Yes 🗆	No 🔲	N/A 🕢

Page 4 of 7

SECTION 10: MUNICIPAL FACILITIES

For events taking place in Pinafore Park, o and Property Management staff once the	rganizers will need to ar Special Events Permit A	range an onsite	e meeting with been approved.	Parks, Rec
Have you contacted Parks and Recreation			No 🗆	N/A 🗌
Have you rented a pavilion/facility and sig	ned a permit?	Yes 🕢	No 🗌	N/A □
If yes, please provide the location of the re	ental and attach a copy	of the permit		
Do you require additional picnic tables or and Property Management Dept and that				
and Froperty Management Sept and that	denvery, piece ap is ene i	Yes 🗹	No 🗆	N/A 🗆
If Yes, how many are you requesting? #	of Picnic Tables:	# of Garl	page Cans: 2	
Have you made arrangements with Enviro	nmental Services staff fo	or recycling cor	ntainers and col	lection?
		Yes 🗌	No 🗹	N/A □
Will you require municipal support for:	Water	Yes 🔲	No 🗹	N/A □
viiii /oz yodano iiiziiiziiziiziizii	Hydro	Yes 📝	No 🗆	N/A 🗀
Please note that all equipment and extens certification body under the Ontario Electrication body under the Ontario Electrication body under the Authority. If required, please attach the Number: If required, have you obtained a Hydrant O	trical Safety Code or hi Electrical Safety Author	ave been inspe	ected by the Ele	ectrical Safety
If Yes, please attach a copy of the Permit a	nd provide the Permit N	lumber:		-
SECTION 11: ACCESSIBILITTY				
As an event organizer, it is your respons Accessibility for Ontarians with Disabiliti requirements to meet for accessibility. displayed throughout the event venue to washrooms and parking. Although not req plan to the Municipal Accessibility Advisor	ies Act (AODA). Organ Please note that dire indicate the barrier-frouired, the Special Event	izations with a ctional signag se path of trav s Committee r	at least one er e needs to be rel and location ecommends sul	nployee have prominently of accessible
SECTION 12: OTHER SERVICES/RESOURCE	<u>s</u>			
Security: Has a privately licenced security in the security is the security in the security in the security is the security in the security in the security is the security in the security in the security in the security is the security in the security in the security in the security is the security in the security in the security in the security is the security in			Yes 🗌	No ⑦
First Aid: For events with an anticipated a required to be retained. Have you confirm If Yes, please attach documentation provid	ed First Aid services?	Yes 🗆	No 🗌	are N/A 🗹

Page 5 of 7

-32.

Ambulance: Has Emergency Medical Services (Ambulance Service) bee planned emergency access to the site?	n contacted regarding your Yes 🗌	event and No 🗹
Fireworks: Will there be fireworks as part of your event? If Yes, a permit for exhibition fireworks is required through the Fire Dep	Yes □ artment.	No 🗹
SECTION 13: SIGNATURE		
That the information contained in this application and any documental provided in support of the application, by myself, my agents, consult information and will become part of the public record. As such, and in <i>Municipal Freedom of Information and Protection of Privacy Act</i> , R.S.O. City of St. Thomas making this application and its supporting document including copying and disclosing the application and its supporting documents.	ants and solicitors, constitu accordance with the provisi 1990, c.M.56, I hereby cons tation available to the gene	ites public ions of the sent to the eral public,
their request.	July 22nd 2019	
(Signature of Individual Completing this Application)	(Date completed)	
Office Use Only: Application Received: July 39 19 Committee	Approval:	

SECTION 14: INSURANCE

STATEMENT OF INDEMNIFICATION

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Please note that an approved event may be cancelled should insurance coverage not be provided and may be altered or cancelled as a result of an emergency situation.

Safety, Lo	ve, & Butterfly Wings	Violence Agains	st Women Services Elgin County
	(Event Name)		(Organizing Group)
	y and save harmless The Corporati e from any and all liabilities, dama		nas and all persons for whom it is a or actions arising out of:
	property including loss of use the at any time there from, occasion		
Safety, Lo	ve, & Butterfly Wings organ	Violence Agains	t Women Services Elgin County
	(Event Name)		(Organizing Group)
damage or inju	ir any part thereof arising from or or iry is due to the act, default or neg s, servants, employees, contractor Diane Ingram	ligence of The Corporati	on of the City of St. Thomas, its
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Address:	300 Talbot Street Suite 26
		Telephone:	519.633.0155
		Date:	July 22nd 2019
		Event Name:	Safety, Love, & Butterfly Wings
		Organizing Group:	Violence Against Women Services Elgin County
		Event Dates:	Saturday Sept.21.2019

Violence Against Women Services Elgin County

Safety, Love, & Butterfly Wings Annual Butterfly Release

Saturday September 21st 1:30 to 3pm Lions Club Celebration Pavilion – Pinafore Park

The event is about how together with our community we are able create the transformation necessary to ensure safety, love, and equity.

The event begins with a welcome and presentation of what has happened in the last year in the service of women, girls, and boys who have found safety, support, and hope as result of community support and kindness. We'll share the profound difference that safety and love makes for families.

Then we'll look ahead and make our shared commitment to continue to stand together with families as they pursue their hopes for safer lives by releasing butterflies. Each butterfly represents a woman or child that will find safety and counsel 24 hours a day in the year ahead at Women's Place Elgin's Emergency Shelter.

In advance of the event, we'll be asking people in St. Thomas & across Elgin County to sponsor butterflies (at a cost of \$30 each) to show their support for women who have been abused and their children.

SECTION 1: EVENT AND ORGANIZER INFORMATION Overdose Awareness **Event Name:** August 28, 2019 Date(s): 1000 1400 **End Time:** Start Time: Just east of 300 Talbot Street - Alley Way Location(s): Southwestern Public Health **Organizing Group:** Margaret Hutchinson #2: Emily Hanley Contact Name #1: Street Address: Just east of 300 Talbot Street - Alley Way ____ Province: ON St. Thomas Postal Code: Town/City: 5196319900 ext. 1282_{#2:}5196319900 ext. 1231 Phone Number #1: mhutchinson@swpublichealth.ca **Email Address:** Expected Attendance: <u>unknown</u> Number of Event Personnel/Volunteers: <u>4</u> Location and number of washrooms in place: ______ Location and Number of Parking Spaces: _______ Number of Accessible Washrooms: none Number of Accessible Parking Spots: unknown Please describe your specific event. Attach additional sheets as necessary. International overdose awareness day event. Naloxone training and harm reduction education. Free food and non-alcoholic drink (pre-packaged). No open flame or cooked food. **SECTION 2: FOOD AND BEVERAGE** Will food/beverage of any kind be available at this event? If Yes, you must notify Southwestern Public Health at 519-631-9900 at least 2 weeks prior to the event.

SECTION 3: PERSONAL SERVICES

Will there be personal services of any kind offered to the public at this event If Yes, you must notify Southwestern Public Health at 519-631-9900 at least 2	? Yes ☐ 2 weeks prior to t	No ☑ he event.
Personal services include but are not limited to barbering, manicures, pedicuplercing.	ures, esthetics, tal	ttooing and
SECTION 4: TENTS		
Will there be an indoor or tent covered area used for public assembly as part	t of the event? Yes 🔲	No ☑
If Yes, please specify the number and size of tents		
If the tents are larger than $60m^2$ cumulatively, a building permit is required t Services. Please attach a copy of the Permit and provide the Permit Number		
Please note that Indoor or Tent covered areas for public assembly must com requirements enforced by Southwestern Public Health. Please contact the To information on how to meet these requirements.	ply with Smoke F obacco Enforceme	ree Ontario Act ent Officer for
SECTION 5: SERVING OF ALCOHOL		
Will alcohol be consumed at the event? If Yes, you must review and meet the requirements of the City's Alcohol Police Rec and Property Management Department for Special Events taking place of	Yes cy available throu on municipal prop	No ☑ igh the Parks, erty.
You must also comply with the Alcohol and Gaming Commission of Ontario (responsible to notify and provide any pertinent information required under obtaining a Special Occasion Permit. You must adhere to the Liquor Licence ansure access is given to the Police and AGCO Inspectors for the purposes of copy of the liquor permit with this application. If utilizing the services of a calendorsements to provide off — premises beverage services, organizers shall strongly date/time/location/services as well as a copy of the establishment	the AGCO guidelich Act and its Regula finspections. Plea Iterer with all the Supply a letter fro	nes for utions and use submit a required im the licensee
The area where alcohol is being served has to have a 36" (0.9m) high barrier is a no staking policy in all of the City's Parks, Recreation and Property Mana	/partition. Please agement facilities	note that there
SECTION 6: MUNICIPALLY SIGNIFICANT EVENT		
If you wish to apply for a "Special Occasion Permit," through the Alcohol and (AGCO), you must obtain a letter of approval from City Council, declaring you by submitting the request to the City Clerk's Department. Please note that sweeks.	ur event "municip	ally significant"
Will you be requesting that City Council declare your event a "Municipally Si		No 🗹
SECTION 7: MUSIC / NOISE	169 🖂	40 EI
Will there be a concert or musical entertainment as part of the event?	Yes 🗌 💮 🛚	No ✓

If Yes, please note that the use of sound reproduction devices is authorized between the hours of 8:00 a.m. and 11:00 p.m. so long as the Police are satisfied that said devices are being "used in a reasonable manner" and not intolerably high. It is the responsibility of the organizers to obtain any applicable musical licencing through SOCAN for events not taking place in a City facility.

Please note that if utilizing a temporary stage structure, regulations are found under the Occupational Health and Safety Act and enforced by the Ministry of Labour. A resource document for event organizers can be found on the Special Event Permits page on the City of St. Thomas website.

Tourid of the Special Event Fernits page of				
SECTION 8: ANIMALS				
Will there be a Petting Zoo or Animals at the If Yes, the Southwestern Public Health must are not permitted in the Animal Control By Law must be approved by City Council. Please note that such approval may take se	t be notified of the eve -Law 71-2011, an Applionse attach a copy of the	ation for Temp	orary Exemption	on to the By-
SECTION 9: ROAD CLOSURES / TRAFFIC FLO	OW CHANGES			
Are you anticipating any road closures or tr	raffic flow changes?		Yes 🗌	No ✓
If Yes, please describe the road closure req of Way Occupancy Permit and City Council approval may take several weeks.	approval is required for	r all road closur	es. Please note	sure. A Right that
		-		
Please attach a copy of the Right of Way O	ccupancy Permit and pr	ovide the perm	nit #:	
If the event is a Parade / Run / Walk / Pass under the Special Events page on the City v	through Sporting Event website. Describe the ev	t, please refer to vent and attach	o the city roads a map or sketo	map located ch.
**				<u></u>
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Do you require traffic control? If Yes, please contact the St. Thomas Police	e Services at (519) 631-:	1224 ext. 4177.	Yes 🗆	No 🗹
PLEASE NOTE: Marshalls, volunteers and sp can direct traffic pursuant to the Highway	Traffic Act.		rect traffic. Onl	y the police
Have you contacted the Env Services Depart			No 🗀	NI/A 🗆
	Barricades	Yes □ Yes □	No ☐ No ☐	N/A □ N/A □
	No Parking Signs Detour Signing	Yes 🗌	No 🗌	N/A 🗆

SECTION 10: MUNICIPAL FACILITIES

For events taking place in Pinafore Park, on the Property Management staff once the	organizers will need to arra	ange an onsit	e meeting with	Parks, Rec
Have you contacted Parks and Recreation		Yes 🗹	No 🗆	N/A 🗆
Have you rented a pavilion/facility and sig	ned a permit?	Yes 🗌	No ✓	N/A □
f yes, please provide the location of the r	ental and attach a copy of	f the permit.		
Do you require additional picnic tables or and Property Management Dept and that	garbage cans? Please not	e availability i	is at the discreti	on of the Parks, Rec
and Property Management Dept and that	delivery/pick up is the re-	Yes 🗹	No 🗌	N/A 🗆
f Yes, how many are you requesting? #	of Picnic Tables: 1	# of Gar	bage Cans: 1	
Have you made arrangements with Enviro	onmental Services staff fo			
		Yes 🗌	No 🔽	N/A 🗆
Will you require municipal support for:	Water	Yes 🔲	No 🗹	N/A □
	Hydro	Yes 🗌	No ✓	N/A □
certification body under the Ontario Ele Authority. If required, please attach the Number: If required, have you obtained a Hydrant	Electrical Safety Authori	ty documenta Yes □	ation and provi	de the Permit N/A ☑
If Yes, please attach a copy of the Permit	and provide the Permit N	umber:		
SECTION 11: ACCESSIBILITTY				
As an event organizer, it is your respon Accessibility for Ontarians with Disabili requirements to meet for accessibility displayed throughout the event venue t washrooms and parking. Although not re plan to the Municipal Accessibility Adviso	ties Act (AODA). Organiz . Please note that direct o indicate the barrier-fre quired, the Special Events	eations with ctional signage e path of tra ccommittee i	at least one engling in the least one engline	mployee have prominently of accessible
SECTION 12: OTHER SERVICES/RESOURCE	<u>ES</u>			
Security: Has a privately licenced security If Yes, what company and how many secu			Yes 🗆	No ☑
First Aid: For events with an anticipated	attendance of more than	200 people, f	First Aid services	s are
required to be retained. Have you confirm	ned First Aid services?	Yes 🖂	No 🗹	N/A ☑
If Yes, please attach documentation prov	iding proof that First Aid s	ervices have b	peen retained.	

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Ambulance: Has Emergency Medical Services (Ambulance Service) bee planned emergency access to the site?	n contacted regarding your Yes □	event and No 🗹
Fireworks: Will there be fireworks as part of your event? If Yes, a permit for exhibition fireworks is required through the Fire Dep	Yes □ artment.	No ☑
SECTION 13: SIGNATURE		
That the information contained in this application and any documental provided in support of the application, by myself, my agents, consult information and will become part of the public record. As such, and in Municipal Freedom of Information and Protection of Privacy Act, R.S.O. City of St. Thomas making this application and its supporting documer including copying and disclosing the application and its supporting documer request.	ants and solicitors, constitu accordance with the provis 1990, c.M.56, I hereby con- station available to the gene	utes public ions of the sent to the eral public,
(Signature of Individual Completing this Application)	2019-08-01 (Date completed)	
Office Use Only: Application Received: Pug (0, 2019) Committee	Approval:	

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SECTION 14: INSURANCE

A Certificate of Insurance is required providing proof of \$5,000,000 in insurance coverage, including the naming of the City of St. Thomas as an Additional Insured under the corresponding policies. A copy of the required insurance MUST be submitted a minimum of two weeks prior to the start of the event. The Special Events Committee reserves the right to impose additional requirements and increased insurance coverage for large community events.

The provision of the completed and signed Statement of Indemnification below is also required.

Please note that an approved event may be cancelled should insurance coverage not be provided and may be altered or cancelled as a result of an emergency situation.

STATEMENT OF INDEMNIFICATION		
Internation Overdose Awareness Day	Southwe	stern Public Health
(Event Name)		(Organizing Group)
shall indemnify and save harmless The Corporation o law responsible from any and all liabilities, damages,	•	•
any damage to property including loss of use thereof death resulting at any time there from, occasioned by	,	, ,
International Overdose Awareness Day organized	Southwes	tern Public Health
(Event Name)		(Organizing Group)
its officers, agents, servants, employees, contractors, the premises or any part thereof arising from or occa damage or injury is due to the act, default or negliger officers, agents, servants, employees, contractors, cu	sioned by any cause nce of The Corporation	whatsoever, except where such on of the City of St. Thomas, its
Name (Print): Felix Harmos	Name (Print):	Margaret Hutchinson
	Address:	1230 Talbot St., St Thomas
	Telephone:	519-631-9900 x1282
	Date:	2019-08-01
	Event Name:	International Overdose Awareness Day
	Organizing Group:	Southwestern Public Health
	Event Dates:	August 28, 2019