



# Oak Grove Parks & Recreation

1300 SE 30th Street · Oak Grove, MO 64075 · (816) 690-4003 · Fax (816) 625-1537

<b>Please Print</b>	Date of Application:
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**Event Information:**

Event Name:

Requested Date(s)	Set up Time:	Event Time:	Tear Down Time:
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Name/Location of Facility Being Requested:

<p><b>Webb Park</b></p> <input type="checkbox"/> Field # <input type="checkbox"/> Shelter # <input type="checkbox"/> BB Court <input type="checkbox"/> Tennis Court <input type="checkbox"/> Entire park	<p><b>Frick Park</b></p> <input type="checkbox"/> Athletic Field # <input type="checkbox"/> Shelter <input type="checkbox"/> Arena <input type="checkbox"/> Hillside <input type="checkbox"/> Entire park	<p><b>Fieldhouse/Davis</b></p> <input type="checkbox"/> Fieldhouse main room <input type="checkbox"/> Fieldhouse Party Room <input type="checkbox"/> Davis upstairs <p><b>Caraway Lake</b></p> <input type="checkbox"/> Allowable open space	<p><b>Bent Oak Park</b></p> <input type="checkbox"/> Aquatic Center <input type="checkbox"/> Allowable open space <p><b>Other</b></p> <input type="checkbox"/> Skatepark <input type="checkbox"/> Walk Trail/Open Area
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Number of Participants Anticipated to Attend:

<input type="checkbox"/> < 50	<input type="checkbox"/> 50 - 100	<input type="checkbox"/> 101 - 250	<input type="checkbox"/> 251 - 500	<input type="checkbox"/> > 501
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Number of Spectators Anticipated to Attend:

<input type="checkbox"/> < 50	<input type="checkbox"/> 50 - 100	<input type="checkbox"/> 101 - 250	<input type="checkbox"/> 251 - 500	<input type="checkbox"/> > 501
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Description of requested event (may attach typed sheet if necessary in accordance with section 235.230.B of municipal code):

Have you held similar events with OGP&R? <input type="checkbox"/> NO <input type="checkbox"/> YES (provide information)→	Name of Event:	Date of Previous Event:
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**Contact Information:**

Name of Organization Sponsoring Event:

Name of Contact Person Prior to Event:	E-Mail Address:
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Address:	City:	State:	Zip:
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Primary Phone #:	Secondary Phone #:	Day of Event Contact Phone #:
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Name of Contact Person Day of Event:	E-Mail Address:
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APPLICATION FOR SPECIAL USE / EVENT FORM

**Event Needs:**

Will your event require the service of outside vendors, businesses, or organizations?

NO     YES If yes, please select from services below:

Concessions/Catering/Vending/Food Trucks     Amplified Sounds (including DJ, microphone, speakers, etc.)

Dunk Tank     Pony Rides     Inflatables     Petting Zoo     Other (please explain below)

Will your event require any type of special equipment/apparatus to be brought into the park(s)?

NO     YES If yes, please list:

Will your event require off road and/or field parking?

NO     YES If yes, anticipated number of vehicles:

Explain: \_\_\_\_\_

Do you currently have liability insurance that would cover this event? *Your group will be held liable for damage(s) during your event.*

NO     YES

NOTE: Liability Insurance indemnifying Oak Grove Parks & Recreation will be required for all special use permits.

**Policy must be provided one month prior to event**

Please check any of the services your event will require:

<input type="checkbox"/> Gate/Admission Fees	<input type="checkbox"/> Law Enforcement	<input type="checkbox"/> First Aid Station
<input type="checkbox"/> Advertising - Type	<input type="checkbox"/> Emergency Vehicles	<input type="checkbox"/> Volunteers
	<input type="checkbox"/> Concession Sales	<input type="checkbox"/> Other

Please list any additional requests you may have regarding your event. Please include details and use additional pages if needed.

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Please do not print any literature publicizing this event unless you have received an approved copy of your Special Use Permit signed and dated by a representative of the Parks and Recreation Department.

**Oak Grove Parks & Recreation Use Only:**

Date Received:

<input type="checkbox"/> Special Event	<input type="checkbox"/> Special Use	<input type="checkbox"/> Fees Required	<input type="checkbox"/> Fees Waived
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved	<input type="checkbox"/> Yes	
<input type="checkbox"/> Denied	<input type="checkbox"/> Denied	<input type="checkbox"/> No	

Reason for Denial: \_\_\_\_\_

<b>Fee Amounts:</b>	Special Event Reservation	\$ _____
	Park Employee Point of Contact	\$ _____
	Law Enforcement	\$ _____
	Other:	\$ _____
	<b>Total Estimated Cost:</b>	\$ _____

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_