APPLICATION FOR DEMONSTRATION/SPECIAL EVENT PERMIT
LEE'S SUMMIT PARKS AND RECREATION

See Attachments for Guidance and Information on Completing This Form

Application Date: _____

Section One: Contact Information			
This is an application for a:	☐ Demonstration	☐ Special Event	
Applicant Name:			
Organization (if Applicable:)			
E-Mail Address:		Telephone:	
Street Address:			
City, State and Zip:			
Is this your first event permit with LSPR?	☐ Yes ☐ No	At proposed location?	☐ Yes ☐ No

Section Two: Event Information					
Event Date:		Event Start Time (including Setup):		Event End Time (including Teardown):	
Proposed Location:					
Purpose / Description of Event: *Attach additional sheet if necessary.					
Approx. Number of Participants:		Approx. Parking Spaces Needed:			
Event Advertisement: Please indicate all locations, means and methods of advertising the event:	☐ Lee's Summit ☐ Eastern Jackson County ☐ KC Metro ☐ Private Invitation ☐ Publicly Advertised ☐ Social Media ☐ Other _____				
Fee or Admission Charge:	$ _____ per _____ ☐ No Fees/Admission Charges				
Is the Event a Commercial/For Profit Activity?	☐ Yes ☐ No				
Event Open to Public?	☐ Yes ☐ No	Amplified Music?	☐ Yes ☐ No		

Section Three: Supplemental Permit Questions		
Will Alcohol be Served?	☐ No	☐ Yes (Parks Permit Required)
Will Banners or Signs be Displayed?	☐ No	☐ Yes (Parks Permit Required)
Will Vendors be at the Event?	☐ No	☐ Yes (City Business License & Parks Permit Required)

Section Four: Requirements (to be Completed by LSPR)		
Emergency Action Plan:	☐ Not Required	☐ Attached
Comfort Stations:	☐ Not Required	☐ Number Required: _____
Commercial General Liability Insurance:	☐ Not Required	☐ Attached
Shelter Reservation/Fees:	☐ Not Required	☐ Attached
Site Plan:	☐ Not Required	☐ Attached

I understand and agree that I am making application for the above-referenced activity/event, and there is no guarantee a Permit will be issued in connection with this application. I also understand I may be required to provide additional information at the request of LSPR regarding my event. If a Permit is issued, I agree: 1) if any information contained in this application is found to be false or misleading; 2) should conduct of the event or activity not be as described in this Application; or 3) should any applicable law, regulation, code or law be violated, the Permit and any reservations associated therewith will automatically become null and void and any Activity or Event associated therewith will immediately cease.

I understand if this Application is approved, I will be required to sign and adhere to the Agreement for Demonstration/Special Event Permit, and the failure to comply with any of the requirements or obligations of either this Application document or the Agreement shall constitute the cancelation of any Permit issued.

I certify the information contained in this Application is true, accurate, and complete to the best of my knowledge.

_____ _____

Signature of Applicant/Authorized and Responsible Representative Date