

Special Event Permit Application

I. Title and Brief Description of Event

Wild Adventure Race Spring Sprint

The orienteering section/trail run portion of an event with a start/finish at Lake Elmo Regional Park.

II. Applicant Information

The applicant is responsible for answering all questions, including inquiries from media and citizens.

Applicant: Liz DeTonga Title: Race Director

Address: 14840 130th St W, Stillwater, MN 55128

Business/Organization: Wild Adventure Race

Daytime Phone: same as cell Mobile Phone: 651-895-5785 Emergency Phone: _____

III. Event Timetable

A. Requested day and date: Saturday June 1st 2013

B. Requested Hours of Operation, from 08 a.m./p.m. to 3 a.m./p.m.

C. Set up beginning day and date June 1, time 6 a.m./p.m.

D. Dismantle by day and date June 1, time 6 a.m./p.m.

E. Anticipated number of participants: 160; and spectators: 0

IV. Insurance

Attach to this application either an insurance policy and certificate of insurance including the policy number and description of liability coverage. The policy must state that any outside uses to be used for an event is covered. The policy must also show evidence that the requested event is not excluded from insurance liability.

We get insurance based on the number of participants. This occurs much closer to the race, usually within 2 weeks of the event. We list all parks and/or private landowners as additional insured. We can provide you an example of an additional insured certificate or you can reference last year's insurance certificate.

V. Check All Items that Apply to your Event

- Use of a Public Facility (note facility): Sun Fish Lake Park
- Event participant and/or spectator parking areas (describe): 2-3 volunteer vehicles
- Entertainment or stage location (provide to-scale drawings);
- Construction or erection of temporary structures (may need permit: check with planning department);
- Trash containers (indicate # and locations): _____;
- Portable toilet facilities (indicate # and locations): _____;
- First aid facilities (indicate who is providing): We provide an EMT on-site
- Parade and/or parade floats (may need permit);
- Fireworks and/or pyrotechnics site (may need permit, check with the fire department);
- Cooking facilities, open flame, or vehicle fuels (may need permit, check with fire department);
- Electricity (indicate source and plan): _____;
- Other (please describe): _____

VI. Food, Beverages, and/or Entertainment

A. If your event includes music, live entertainment, sound amplification or any other noise impact, please describe, including the intended hours of the music, sound or noise.

B. Will alcoholic beverages be served? ___ Yes No

C. Name of liquor establishment: N/A

D. For service of alcohol outside a licensed premise, include a diagram showing the defined area of the alcohol concession service and attach a copy of your certificate of liquor liability insurance covering the limits of the alcohol service area.



B. If the event is to occur at night, describe how you will light the event area in order to increase the safety of participants and spectators coming to and leaving the event:

N/A

IX. Clean-up

List persons responsible for clean-up duties:

Liz DeToro
Craig Parrera

X. Mitigation of Impacts on Others

Describe how you intend to mitigate the impacts of the special event on businesses, churches, neighbors, motorists, and others:

We will have orange and white checkpoints/orienting flags along trails. Participants will run the trails looking for these flags. They will bike into the park. There will be no noise expected or anything else that should affect the community. Racers practice a "leave no trace" philosophy.

Note: Any condition which causes adverse impacts may be cause to revoke the Special Events Permit

Applicant Signature: Elizabeth DeToro Date of Application: 4/8/13

Request for Special Event Permit

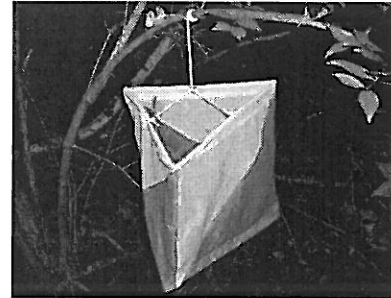
What: Wild Adventure Race Sprint Series Race 1

When: June 1, 2013

Where: Sun Fish Lake Park and Lake Elmo Park Reserve

Time: 6:00 am to 4:00 pm (race competitors will be in the park from approximately 10:00 am to 2:00 pm)

Description: An adventure race is a team sport that requires navigating a course with maps and a compass utilizing combinations of non-motorized disciplines – on foot, bike, and in boats (canoe, kayak, or raft). It is very similar to orienteering, which has been done at Sun Fish Lake Park in the past. In this particular event, which is designed for beginners, racers in teams of 2 will begin on bikes in Lake Elmo Park Reserve (LEPR). They will be looking for checkpoints along the way. Checkpoints are generally orange and white, lightweight orienteering flags (see image). Racers will also be doing a boat section in LEPR. These two sections could take teams up to 2 hrs to complete, thus spreading out teams quite a bit. After the bike and boat sections teams will leave LEPR by the North Entrance, cross Hwy 5, and enter Sun Fish Lake Park. Teams will then drop their bikes with volunteers in a section of the parking lot or just off the lot, near the trailhead. Teams will then go on foot to look for more checkpoints, approximately 5-10 of them. Most teams should finish in under 1 hour. Once the section is complete, teams will retrieve their bikes and head back across Hwy 5 to the finish in LEPR. The whole course should take the average team 3 hours.



There may be one or two volunteer vehicles, but other than that, the only space we will be occupying is an area with the bikes. This is very flexible. With the start and finish in LEPR, there will be limited impact in Sun Fish Lake Park. The Minnesota Orienteering Club held a similar event in the park several years ago.

We have permission from LEPR and we are coordinating the crossing of Hwy 5 with the Washington County Sheriff's Office and MnDOT.

Max People: 200 competitors plus up to 10 volunteers. The competitors will be well spread out. We will not disturb regular park visitors any more than any other trail runner would. In fact, the comment we usually receive from park managers and staff is that visitors were not even aware an event was happening in the park.

Sound Equipment: None

Sanitary Facilities: None required, the competitors will be running on the trails for approximately 1 hour and then will head to LEPR.

Security: We will have volunteers at the bike drop. Competitors will retrieve bikes after they have done the trail run and return to LEPR.

Food Service: No food will be provided at Sun Fish Lake Park

Fire Protection: Not applicable

Clean Up Plan: Clean up will merely mean removing 5-10 orange and white orienteering flags that will have been placed along the trails, and making sure the parking lot is clear of any possible wrappers from “energy bars” consumed by the participants. This will take no more than one hour.

Waiver: NA

Insurance: We carry a \$1 million insurance per occurrence and provide additional insured certificates for land owners/managers. Provided is an example from a previous race of an additional insured certificate for the City of Duluth.

Safety: We will have EMTs on site.

Miscellaneous: Parking will not be needed (except for a volunteer vehicle or two), but bikes will be dropped in a corner of the lot.

Thank you for considering our request. Please direct any questions to **Rick Odgers** at **612.356.1353** or via email at **ricko@wildadventurerace.com**.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/22/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER McKay Insurance Agency, Inc. 106 East Main Street P O Box 151 Knoxville IA 50138	CONTACT NAME: Meg Carruthers PHONE (A/C, No, Ext): (641)842-2135	FAX (A/C, No): (641)828-2013
	E-MAIL ADDRESS: mcarruthers@mcKayinsagency.com	
INSURER(S) AFFORDING COVERAGE INSURER A Lexington Insurance Company		NAIC # 19437
INSURED Silent Sports Association - AR Series Wild Adventure Race, LLC 8839 Tyler Street NE Blaine MN 55434	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES CERTIFICATE NUMBER: **CL1252227676** REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVP	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	X		9472463	6/2/2012	6/3/2012	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ Excluded
	<input checked="" type="checkbox"/> Includes Athletic						PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> Participants						GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC						
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
							\$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			9472463	6/2/2012	6/3/2012	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 1,000,000
	<input type="checkbox"/> DED	<input type="checkbox"/> RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A				OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Spring Sprint 3-Hour Adventure Race: June 2, 2012. Certificate holder is an additional insured but only with respect to liability arising out of the operations of the above named insured. "This policy is issued, pursuant to Iowa Code section 515.147, by a nonadmitted company in Iowa and as such is not covered by the Iowa Insurance Guaranty Association."

CERTIFICATE HOLDER Washington County 1515 Keats Avenue N Lake Elmo, MN 55042	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Scott Ziller/MEG 