

# CITY OF HAGERSTOWN SPECIAL EVENTS APPLICATION





# CITY OF HAGERSTOWN, MARYLAND

Community Engagement Office

## SPECIAL EVENT APPLICATION for special events taking place on city-owned property

*For events taking place on private property that may be impacted by City regulations, please contact the Community Engagement Officer ([events@hagerstownmd.org](mailto:events@hagerstownmd.org)).*

Business/Organization: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

Is your organization a 501(c)3 non-profit organization?  YES  NO  
If yes, please attach a copy of your IRS determination letter.

Name of Event: \_\_\_\_\_

Proposed Date: \_\_\_\_\_

Proposed rain date, if applicable: \_\_\_\_\_

Proposed Event Hours (include set up and clean up time): \_\_\_\_\_

Proposed Event Location(s) (attach map and/or describe route below if a traveling event, such as a run):

- University Plaza
- Park. Which park? \_\_\_\_\_
- City Street(s). Which street(s)? \_\_\_\_\_
- City Parking Lot. Which lot(s)? \_\_\_\_\_
- Cultural Trail

Description of Event (attach pages if necessary):

Number of People expected: \_\_\_\_\_

Proposed event is:

FREE       TICKETED       BY INVITATION

Does proposed event require street closure?

YES       NO

Are you requesting that Route 40 (Washington Street, Franklin Street) be closed?

YES       NO

Will alcohol be served?

YES       NO

If yes, who will hold the alcohol license? \_\_\_\_\_

Will food be available?

YES       NO

If food is for sale, who will be selling it? \_\_\_\_\_

Will other products be sold:

YES       NO

Will there be tents?

YES       NO

If yes, what size: \_\_\_\_\_

Will there be a stage?

YES       NO

If yes, what size stage? \_\_\_\_\_

Who is providing the stage? \_\_\_\_\_

Will there be live music or amplified sound?

YES       NO

Will there be inflatables (e.g. Bounce House)?

YES       NO

Who is the provider of the inflatable? \_\_\_\_\_

Will there be fireworks?

YES       NO

Who is the fireworks vendor? \_\_\_\_\_

Will you require electrical access?

YES       NO

What will the electricity be used for? \_\_\_\_\_

Will you require water?

YES       NO

What will the water be used for? \_\_\_\_\_

Will there be live animals?

YES       NO

Describe: \_\_\_\_\_

How will you notify the surrounding residents/businesses of your event and any potential impacts?

Describe your plans for marketing your event:

**Return to:**

Community Engagement Officer  
[events@hagerstownmd.org](mailto:events@hagerstownmd.org)  
City of Hagerstown  
1 E Franklin Street, Room 210A  
Hagerstown, MD 21740



# Release & Waiver of Liability

**IMPORTANT: PLEASE READ CAREFULLY BEFORE SIGNING THIS DOCUMENT.**

This **Release and Waiver of Liability** (the “Release”) is executed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ a participant who has attained the age of majority (the “Participant”), in favor of the City of Hagerstown, a municipal corporation formed under the laws of Maryland, as well as its agents, servants, employees, volunteers, insurers, successors and assigns, collectively or individually, (collectively, the “City”). The Participant desires to participate in the \_\_\_\_\_ [name, location and date of event, hereinafter referred to as the “Activity”]. Participant affirms that s/he is in good health and capable of undertaking the activities for which this Release is being granted.

The Participant does hereby freely, voluntarily and without duress execute this Release under the following terms:

1. **Waiver and Release.** In consideration of being permitted to attend the Activity, Participant agrees to release and forever discharge and hold harmless the City from any and all liability, claims and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Participant’s participation in the Activity.

Participant acknowledges that this Release forever discharges City from any and all liability, claim or cause of action that the Participant may have against City with respect to any bodily injury, personal injury, illness (including but not limited to COVID-19), loss, death, or damage to personal property which may result directly or indirectly from Participant’s participation in the Activity.

2. **Medical Treatment.** Participant does hereby release and forever discharge City from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, medical care or service rendered in connection with the Participant’s participation in of the Activity.

3. **Assumption of Risk.** The Participant acknowledges that participating in the Activity may include activities that may be hazardous to the Participant. Participant hereby expressly and specifically assumes the risk of injury or harm in these activities and releases City from any and all liability for injury, illness, death or property damage resulting from the Participant’s activities relating to the Activity.

4. **Insurance.** The Participant acknowledges that City does not carry or maintain health, medical or disability insurance coverage for any Participant. **EACH PARTICIPANT IS ENCOURAGED TO OBTAIN HIS OR HER OWN MEDICAL AND/OR HEALTH INSURANCE COVERAGE BEFORE PARTICIPATING IN THE ACTIVITY.**

5. **Rules and Regulations.** Participant agrees to abide by all applicable City and/or Activity Rules and Regulations. Failure to do so will be grounds for immediate expulsion from the Activity without refund of any

fee paid by the Participant.

6. **Other.** Participant expressly agrees that this Release is intended to be as broad and inclusive as permitted under the laws of the State of Maryland and this Release shall be governed by and interpreted in accordance with the laws of the State of Maryland (without regard to its conflicts of laws principles). Participant agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be in full force and effect.

7. **Effective Date.** This Release shall be effective immediately upon execution and shall apply to any and all activities occurring at the Activity.

IN WITNESS WHEREOF, Participant has read and understood this Release and all of its terms and conditions and has executed this Release as of the day and year first above written.

**PARTICIPANT:**

**WITNESS:**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Printed Name(s)- Minors  
\_\_\_\_\_

Participant Mailing Address  
\_\_\_\_\_

City, State, Zip Code  
\_\_\_\_\_

Date of Birth  
\_\_\_\_\_

Phone Number  
\_\_\_\_\_

**PLANNING CHECKLIST- NOT TO BE RETURNED WITH APPLICATION**

Use this checklist to ensure you have fulfilled all requirements related to your special event. It is not an exhaustive list, but touches upon the main components required to receive a Special Event Permit from the City of Hagerstown and to implement a successful event.

Site plan submitted	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Public safety/security plan reviewed with City	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Severe weather/contingency plan approved	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Crowd manager training completed	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Electricity and water needs communicated	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Parking spaces requested	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Overtime police officers contracted	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Licensed security officers contracted	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Other overtime staff contracted	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Open container law exemption approved by Mayor & Council	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Liquor license obtained from Washington County Liquor Board	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Noise ordinance exemption approved by Mayor & Council	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
City street closure approved by Mayor & Council	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
State highway closure permit applied for	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Fireworks permit received	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Food permits from Washington County Health Department received from food vendors	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Certificates of Insurance from food vendors provided to City	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Hold Harmless agreements from all vendors provided to City	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Sales & Use Tax Certificates received from vendors	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Tables, chairs, tents rented	<input type="checkbox"/> YES	<input type="checkbox"/> N/A
Trash management plan approved	<input type="checkbox"/> YES	<input type="checkbox"/> N/A

- |  |                              |                              |
|--|------------------------------|------------------------------|
| Certifications and inspections for tents   | <input type="checkbox"/> YES | <input type="checkbox"/> N/A |
| Certifications and inspections for inflatables   | <input type="checkbox"/> YES | <input type="checkbox"/> N/A |
| Assembly permit applied for  | <input type="checkbox"/> YES | <input type="checkbox"/> N/A |
| Certificate of insurance provided to City  | <input type="checkbox"/> YES | <input type="checkbox"/> N/A |
| Notification about event provided to businesses/residents<br>(includes traffic control plan) | <input type="checkbox"/> YES | <input type="checkbox"/> N/A |