



## **Tredyffrin Township Event Form**

This form and data sheet will provide necessary guidelines and a suggested format for conducting a walking or running event within Tredyffrin Township.

*It is our goal to ensure that all events of this type are conducted in such a manner that maximizes the safety and welfare of both the event participants and the community.*

**Event Course:** 10 K (6.2 miles) or 5K (3.1 miles) – A set of preset course maps within the township have been developed for the convenience of those wishing to host these running events. If other courses are preferred, the applicant must fill out a waiver form and formally present the course layout to the Traffic Safety Committee for review and approval 30 days prior to the scheduled event.

### **Event Needs\*:**

- Ambulance / Medics on scene
- Police Officer(s) for traffic, security and crowd control
- Public Works – clean up services, cones, barricades, signs

\*Note: All services will be paid at the package rate listed on the fee schedule.

### **Fee Schedule:**

Police - \$70.00 per hour per officer (includes all administrative fees)

Public Works – Flat Fee for 3 hour event. Additional time billed hourly.

Fire Service – Contact Fire Department for current fee rate

# DATA Sheet

Run Sponsor \_\_\_\_\_

Affiliated Organization \_\_\_\_\_

Event Date \_\_\_\_\_

Event Time (Start, Finish) \_\_\_\_\_

Race Director \_\_\_\_\_

## **Race Director Contact Information:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## **Billing Information:**

Bill to \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

**Course / Event Description:**

Course / Event Description \_\_\_\_\_

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Number of Participants Expected \_\_\_\_\_

Duration of Event (list start and finish time) \_\_\_\_\_

**Insurance Information\*:**

Insurance Carrier \_\_\_\_\_

Insurance Carrier Contact Information \_\_\_\_\_

Insured Name \_\_\_\_\_

Policy Number \_\_\_\_\_

Valid Dates of Policy (Expiration) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

*\*Note: Proof of insurance is required, specifically noting this event (attach copy to this document)*

**If you have any questions, please contact the Traffic Safety Unit at 610-408-3667**

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**Official Use Only**

**Approved \_\_\_\_\_ Denied \_\_\_\_\_**

**Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_**