

2012/13
HALIFAX REGIONAL MUNICIPALITY
SPECIAL EVENT / FESTIVAL APPLICATION FORM

Please complete all sections of this application and return to:

HRM Civic Events
Community Relations & Cultural Affairs Department
PO Box 1749
Halifax, NS B3J 3A5
FAX: 902-490-5950

Date: _____ Date Received: _____ (Office)

1. Name of Special Event: _____

2. Name of organization hosting / planning event: _____

3. Type of organization: (please give tax number if applicable)

Special Interest Group	_____
Community Non-profit	_____
Commercial (private sector)	_____
Religious	_____
Political	_____
Charitable	_____
Incorporated Society	_____
Other ____ Please Specify	_____

4. Key contact for event: _____

Address: _____

Postal Code: _____

Phone #: _____ (H) _____ (O) _____ (F)

Email Address: _____

Secondary contact for event: _____

Address: _____

Postal Code: _____

Phone #: _____ (H) _____ (O) _____ (F)

Email Address: _____

5. Name & Main theme of event: _____

6. Main activities of event: _____

7. Objectives of event in order of priority: _____

8. Date(s) and times to be held: _____

9. Please identify the frequency of this event:
Annual _____ One time only _____
Biennial _____ Other _____ Please Specify _____
10. Location(s): _____

11. Historical Background: _____

12. Number of volunteers involved in event: _____
13. Target audience:
(Please describe the demographic reach you expect with this event)

13.1 Percentage of potential audience:

Adult _____ Children _____ Youth _____
Families _____ Seniors _____

14.1 Estimated attendance: _____

Estimated type of attendance:

- a) % who are participants _____
- b) % who are spectators _____
- c) % from local area _____
- d) % from outside the Halifax Regional Municipality _____
- e) % from outside the province _____

14.2 From d and e above, please provide an estimated percentage breakdown for the accommodation type that will be used for out of area visitors.

- a) % Visiting friends & relatives _____
- b) % Campground _____
- c) % Hotel / Motel _____
- d) % Bed & Breakfast _____
- e) % Other - Please Specify _____

General Financial Information only Required in Order to Understand the Scope of the Event Proposed, Information Will Remain Confidential

15. Total operating budget: _____

16. Funding sources: (detail estimated amount)

A. Grants

Provincial: _____
Federal: _____
Other: _____
Total: _____

B. Sponsorship

Private: _____
Corporate: _____
Other: _____
Total: _____

Revenue from other sources:

Source: _____ Funds: _____
Source: _____ Funds: _____
Source: _____ Funds: _____

Funds on hand from other years:

Total Revenue expected:

If available, please attach a detailed budget of projected expenditures (confidential use only).

17. Identify any major sponsors that may be involved:

18. A. If this event is to be used as a fund raiser, who would be the beneficiary?

B. What is the estimated funds you expect to give the beneficiary?

19. Has your event received support from the Halifax Regional Municipality years?
Yes _____ No _____

Please identify the year in which you received support: _____

Please detail the level of support you received in the past: _____

20. Briefly outline your marketing strategy for this event. (Include any print or electronic exposure you expect to receive):

21. Insurance Requirements: The Halifax Regional Municipality requires that special event organizers, whether all or part of the event takes place on or passes over HRM/ public property, during setup, the event, and/or break-down, carry third party liability insurance at a level of not less than \$2,000,000, inclusive Bodily Injury and Property damage, in the case of the event serving or selling liquor, not less than \$5,000,000. The HRM shall be named as “Additional Insured”, and again where liquor shall be served as part of the event, additional liquor liability insurance shall be obtained. **A copy of all required insurance coverage(s) shall be forwarded to HRM, care of either Andrew Cox, Mike Gillett, Billy Comer or Paul Forrest at least 10 working days before the event start date.**
NOTE: For more information on HRM Insurance Requirements please contact Dee Milne at 490-6439.

22. How will this event be evaluated: _____

- A. Will you require Municipal Services? If so, please detail:

Please Note: Many municipal services are subject to costs and are the sole responsibility of the organizer. The municipality reserves the right to ask for pre-payment for these costs in the form of a money order or a certified cheque made payable to the Halifax Regional Municipality, otherwise the costs will be invoiced to the organizer after the event is completed.

- B. Using the attached piece of paper or separate sheet(s), please provide as much detail as possible on your event logistics. Please include all route maps and site plans if applicable. Any and all additional information that you feel will explain your event is encouraged.

23. Will you be using live or recorded music as part of your event?

If the answer is Yes, Canadian copyright law requires that you obtain a performing rights license from SOCAN (www.socan.ca) if you use music. If you do not currently have an account with SOCAN, please contact them at 1-800-707-6226 to obtain the required account number. If you currently have an account with SOCAN, please provide us with your account number.

With regard to the HRM requirements outlined in this application I have signing authority for the above stated event. I understand the HRM requirements of an event organizer as outlined in this application and will ensure that the event I represent will comply with these requirements:

Name Signature

Name Print