WEBER COUNTY SPECIAL EVENT **APPLICATION AND PERMIT**

In Accordance with Title 38 of the Weber County Ordinances Adopted on March 19, 2013

1. Name of applicant: GOAL Foundation

Mailing address: 2440 Washington Blvd

Phone number: 801-399-1773

2. Type and description of event: 30k running event

3. Name of sponsoring/promoting entity: ${\tt GOAL}$ Foundation

Contact person: Abby Monroe

Address:

2440 Washington Blvd

Phone number: 801-399-1773

Dates of event:

April 28th, 2018

Beginning time for each date: 0730 am

Ending time for each date:

1230 pm

- 5. All of the provisions outlined in Weber County ordinance Title 20 have been complied with as specified
 - a. Address & Legal Description of Property where Assembly is to be held: Valley Elementary, Eden Utah
 - b. Proof of Ownership on which Assembly is to be held:
 - c. Nature & Purpose of Assembly:

Running Event

- d. Plans for Limiting Attendance: expecting 300-350 runners
- e. Plans for Fencing and Gates:

Not necessary.

f. Plans for Supplying potable Water including Source and Location of Outlets:

Water will be provided by GOAL Foundation at water stations. Sourced from our offices at 2440 Washington.

g. Plans for Providing Toilet Facilities

Portable restrooms and permanent facilities are available.

h. Plans for Garbage Disposal:

Garbage will be picked up by a sweep team and disposed of in a rented 7 yard dumpster

i. Plans for Medical Services:

Full EMS support provided by Intermountain McKay Dee Hospital. We will seek support of Weber County EMS services.

j. Plans for Illuminating Location:

Not necessary

k. Plans for Parking:

Off Street and parking stalls

I. Plans for Telephone Services:

We will use Ogden City radios for communications

m. Plans for Camping Facilities:

NA

n. Security Plans:

We have support of Weber County Sheriff's Office. Contact: Lt Jason Talbot.

o. Fire Protection Plans:

No fires

p. Plans for Food Concessions including License and Permit Numbers:

We will cut fruit at the finish line. All other food is packaged. Working with Health Dept.

q. Estimated number of Staff:

8-15 total

r. Estimated number of Participants: 300-350

s. Admission fee, donation or consideration:

\$20-\$25

t. Plans for Advertising Signs:

NA

 Proof of Insurance (when required): Certificate of insurance provided by USATF.

6. Application for special event permit shall be Fifty Dollars (\$50.00) non-refundable. Other fee's which may be added: Sheriff Fee: Health Department Fee: 7. Applicant hereby agrees to comply with all Federal, State, and County laws, ordinances, and regulations before, during and after the event. 8. Applicant hereby agrees to indemnify and save harmless Weber County, its officers, agents, and employees from and against any and all claims resulting from the use of the premises by the Applicant, the Applicant's invitees, licensees, agents and employees. 9. Applicant agrees to permit law enforcement personnel the free and unrestricted access to and upon the premises at all times during the event for all lawful and proper purposes not inconsistent with the intent of the permit. 10. This permit may be revoked upon breach of any of the conditions herein or at the discretion of the authorized officer. 11. This permit is not transferable. Date:____ Weber County Sheriff's Office Date:_____ Weber-Morgan Health Department Date: Weber Fire District\Emergency Medical Services Date: Weber County Building Inspector Date: Weber County Recreational Services Department Date:_____ Weber County Business Licenses Other Date: ____ Planning & Zoning

v. Will there be any sales of beer or other alcohol:

NA

CERTIFICATE OF INSURANCE

PRINT DATE: 11/20/2017

CERTIFICATE NUMBER: 20171120571053

AGENCY:

Integro USA Inc. d/b/a Integro Insurance Brokers 2727 Paces Ferry Road, Building Two, Suite 1500 Atlanta, GA 30339 678-324-3300 (Phone), 678-324-3303 (Fax)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES

NAMED INSURED:

USA Track & Field, Inc. 130 East Washington Street, Suite 800 Indianapolis IN 46204

GOAL Foundation

INSURER A: Philadelphia Indemnity Ins. Co. NAIC #: 18058 INSURER B: Philadelphia Indemnity Ins. Co. NAIC #: 18058

INSURERS AFFORDING COVERAGE:

EVENT INFORMATION:

Winter Race Circuit - 30K (4/28/2018 - 4/29/2018)

POLICY/COVERAGE INFORMATION:

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. AGGREGATE

INS	TYPE OF INSURANCE:	POLICY NUMBER(S):	EFFECTIVE:	EXPIRES:	LIMITS:				
Α	GENERAL LIABILITY								
	X Occurrence	PHPK1721333	11/1/2017 12:01 AM	11/1/2018 12:01 AM	GENERAL AGGREGATE (Applies Per Event)	\$3,000,000			
	X Participant Legal Liability				EACH OCCURRENCE	\$1,000,000			
					DAMAGE TO RENTED PREMISES (Each Occ.)	\$1,000,000			
					MEDICAL EXPENSE (Any one person)	EXCLUDED			
					PERSONAL & ADV INJURY	\$1,000,000			
					PRODUCTS-COMP/OP AGG	\$3,000,000			
В	UMBRELLA/EXCESS LIABILITY								
	X Occurrence		11/1/2017 12:01 AM	11/1/2018 12:01 AM	EACH OCCURRENCE	\$10,000,000			
					AGGREGATE (Applies Per Event)	\$10,000,000			

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:

Coverage applies to USA Track & Field sanctioned events and registered practices, including any directly related activities, such as event set-up and tear-down, participant check-in and award ceremonies.

The certificate holder is an additional insured per the following endorsement: Additional Insured - Certificate Holders (Form PI-AM-002)

The General Liability policy is primary and non-contributory with respect to the negligence of the Named Insureds (Form CG 00 01)

The General Liability policy contains a blanket Waiver of Subrogation as required by contract per Waiver of Transfer of Rights of Recovery Against Others (Form CG

Excess policy follows form of underlying General Liability.

CERTIFICATE HOLDER:

Weber County 1000 N 1200 W Ogden UT 84404

NOTICE OF 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:

WEBER COUNTY SPECIAL EVENT **APPLICATION AND PERMIT**

In Accordance with Title 38 of the Weber County Ordinances Adopted on March 19, 2013

1. Name of applicant: GOAL Foundation

Mailing address: 2440 Washington Blvd

Phone number: 801-399-1773

Type and description of event: 1/2 Marathon

Name of sponsoring/promoting entity: GOAL Foundation

Contact person: Abby Monroe

Address:

2440 Washington Blvd

Phone number: 801-399-1773

Dates of event:

April 7th, 2017

Beginning time for each date: 0730 am

- Ending time for each date: 1230 pm
- 5. All of the provisions outlined in Weber County ordinance Title 20 have been complied with as specified below.
 - a. Address & Legal Description of Property where Assembly is to be held:

Eden Park, Eden Utah

- b. Proof of Ownership on which Assembly is to be held:
- c. Nature & Purpose of Assembly:

Running Event

- d. Plans for Limiting Attendance: expecting 350-400 runners
- e. Plans for Fencing and Gates:

Not necessary.

f. Plans for Supplying potable Water including Source and Location of Outlets:

Water will be provided by GOAL Foundation at water stations. Sourced from our offices at 2440 Washington.

g. Plans for Providing Toilet Facilities

Portable restrooms and permanent facilities are available.

h. Plans for Garbage Disposal:

Garbage will be picked up by a sweep team and disposed of in a rented 7 yard dumpster

i. Plans for Medical Services:

Full EMS support provided by Intermountain McKay Dee Hospital. We will seek support of Weber County EMS services.

j. Plans for Illuminating Location:

Not necessary

k. Plans for Parking:

Off Street and parking stalls

I. Plans for Telephone Services:

We will use Ogden City radios for communications

m. Plans for Camping Facilities:

NA

n. Security Plans:

We have support of Weber County Sheriff's Office. Contact: Lt Jason Talbot.

o. Fire Protection Plans:

No fires

p. Plans for Food Concessions including License and Permit Numbers:

We will cut fruit at the finish line. All other food is packaged. Working with Health Dept.

q. Estimated number of Staff:

8-15 total

r. Estimated number of Participants: 350-400

s. Admission fee, donation or consideration:

\$20-\$25

t. Plans for Advertising Signs:

NA

 Proof of Insurance (when required): Provided by USA Track & Field.

Revised: 2013-03-21 Page 2 of 3

6. Application for special event permit shall be Fifty Dollars (\$50.00) non-refundable. Other fee's which may be added: Sheriff Fee: Health Department Fee:____ Other: 7. Applicant hereby agrees to comply with all Federal, State, and County laws, ordinances, and regulations before, during and after the event. 8. Applicant hereby agrees to indemnify and save harmless Weber County, its officers, agents, and employees from and against any and all claims resulting from the use of the premises by the Applicant, the Applicant's invitees, licensees, agents and employees. 9. Applicant agrees to permit law enforcement personnel the free and unrestricted access to and upon the premises at all times during the event for all lawful and proper purposes not inconsistent with the intent of the permit. 10. This permit may be revoked upon breach of any of the conditions herein or at the discretion of the authorized officer. 11. This permit is not transferable. Date: 11 29 17 Applicant Date:____ Weber County Sheriff's Office Date: Weber-Morgan Health Department Date:____ Weber Fire District\Emergency Medical Services Date:___ Weber County Building Inspector Date: Weber County Recreational Services Department Date:____ Weber County Business Licenses Other Date: _____ Planning & Zoning

v. Will there be any sales of beer or other alcohol:

NA

Revised: 2013-03-21 Page **3** of **3**

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GOAL Foundation

INSURERS AFFORDING COVERAGE:

INSURER A: Philadelphia Indemnity Ins. Co. NAIC #: 18058 INSURER B: Philadelphia Indemnity Ins. Co. NAIC #: 18058

EVENT INFORMATION:

Winter Race Circuit Half Marathon (4/7/2018 - 4/8/2018)

POLICY/COVERAGE INFORMATION:

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INS	TYPE OF INSURANCE:	POLICY NUMBER(S):	EFFECTIVE:	EXPIRES:	LIMITS:				
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Excess policy follows form of underlying General Liability.

CERTIFICATE HOLDER:

Weber County 1000 N 1200 W Ogden UT 84404

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AUTHORIZED REPRESENTATIVE: