

City of Albany Block Party Application

Applicant Name: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Street Name: _____

Cross Streets: _____ *and* _____

Date: _____ Time: _____

of Attendees: _____

Event Description: _____

Alternate Contact: _____

Address: _____

Phone Number: _____

Email: _____

Required Fees:

REC'-ing Crew (see "How to Plan a Block Party" for descriptions) :

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> App. + Barricades* (\$40.00) | <input type="checkbox"/> Staff (\$100) | <input type="checkbox"/> Arts & Crafts (\$10) | <input type="checkbox"/> Giant Jenga (\$10) |
| <input type="checkbox"/> Insurance (\$182.74) | <input type="checkbox"/> Music (\$35) | <input type="checkbox"/> Bike Races (\$10) | <input type="checkbox"/> Ker Plunk (\$10) |
| | <input type="checkbox"/> Street Bowling (\$15) | <input type="checkbox"/> Corn Hole (\$10) | <input type="checkbox"/> Bingo (\$10) |

** Application/barricade fee will be discounted 50% if Albany Fire Department is invited to attend and perform a Disaster Preparedness training.*

It is understood and agreed that the City Council Block Party Policy and Procedure must be complied with. I agree to assume the risk of accident or injury sustained from whatever cause in connection with the activity, and release the City of Albany, its officers, agents and employees from any and all liability for any such accident or injury caused by whatever reason, including but not limited to an act of omission. I understand that no medical insurance is provided.

Print _____ Signature _____ Date _____

For Office Use Only:

- | | | |
|--|--|--|
| <input type="checkbox"/> Recreation Approval (Initials: _____) | <input type="checkbox"/> Petition Attached | <input type="checkbox"/> Fire Dept. - Disaster Prev. |
| <input type="checkbox"/> Fire Approval (Faxed on: _____) | <input type="checkbox"/> Barriers: | <i>50% off app/barricade fee</i> |
| Disaster Preparedness Req.: Yes ___ No ___ | D/O Date: _____ | |
| <input type="checkbox"/> Police Approval (Faxed on: _____) | P/U Date: _____ | |