

PARADE REQUEST APPLICATION

This form is to be used by any organization or group requesting permission to sponsor a parade in the Town of New Paltz, N.Y. ("Town"), and must be completed and submitted to the Town Clerk at least 60 days in advance of the parade date. All steps of this application must be completed. The completed application must be delivered to the Town Clerk, 1 Veterans Drive, New Paltz, New York, together with a \$25.00 non refundable administrative fee in order to begin processing the application. Please review the Parade Application Instructions on the reverse side of this application.

Step 1: (all fields must be completed)

Organization/group name and address: NYTA
Contact Person: Mike Vance Phone#: 594-3844 email: mike.h.vance@gmail
Date of Parade: 8/8 Rain date (if any): NA Start time: 8:00 am End time: 10:00
Insurance Carrier: ~~USAA~~ ~~USAA~~ USAT ~ 9:30 am

Step 2: (check ONE parade route only)

Place a (X) mark indicating your parade route choice. If you wish to propose an alternate parade route, check the box provided and fill in the complete route. A final determination on which parade route will be permitted will be made by the Town Board.

If parade is to be followed by an event at a Village or Town park, a separate Event Use Application must be completed and submitted to either the Village Clerk or Town Clerk.

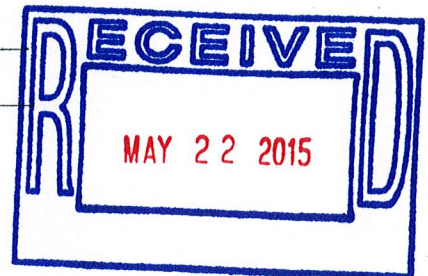
- Parade Route One: Beginning in the New Paltz Middle School parking lot, proceed north on S. Manheim Blvd. to Main Street. Proceed west on Main Street to Plattekill Avenue. Proceed south on Plattekill Avenue to the Village of New Paltz Fire Department/Village Hall. If you wish to extend your parade end-point to the entrance to Hasbrouck Park, check here _____. This does not grant you permission to use Hasbrouck Park. You must submit a separate "Event Use Application" to the Village Clerk.
- Parade Route Two: Beginning on North Manheim Blvd., proceed south to Main Street. Proceed west on Main Street to Plattekill Avenue. Proceed south on Plattekill Avenue to the Village of New Paltz Fire Department/Village Hall. If you wish to extend your parade end-point to the entrance to Hasbrouck Park, check here _____. This does not grant you permission to use Hasbrouck Park. You must submit a separate "Event Use Application" to the Village Clerk.
- Parade Route Three: Beginning on Plattekill Avenue by the SUNY New Paltz Old Main Circle, proceed north on South Oakwood Terrace to Main Street. Proceed west on Main Street to the alleyway/driveway next to Gourmet Pizza and turn south, proceed through the Plattekill Avenue municipal lot back onto Plattekill Avenue and returning south to the SUNY New Paltz Old Main Circle.
- Parade Route Four: Beginning in the New Paltz Middle School Parking lot, proceed south on S. Manheim Blvd. to Plattekill Avenue turn west to Hasbrouck Ave., turn left at intersection of Plattekill and Hasbrouck Aves. and proceed to Hasbrouck Park. This does not grant you permission to use Hasbrouck Park. You must submit a separate "Event Use Application" to the Village Clerk.
- Alternate Parade Route: See description - attached

I, Mike Vance, certify that the above information is correct, I have read the instructions on the reverse side hereof, I agree to abide by the Town Parade Policies, I am authorized to sign this application on behalf of the above-named organization, I understand the applicant shall indemnify and hold the Town and Village of New Paltz harmless from any personal injury, including death, and any property damage arising from the parade, including the applicant's use of the public streets for the parade.

Dated: 5/5/15

Signature: [Handwritten Signature]

Title: Race Director



FOR TOWN INTERNAL USE ONLY

Application Received by Town Clerk on: _____

Sign-Off #1

New Paltz Police Department: ___ Approved ___ Denied ___ Parade route changed to route # ___ Date: _____

Reason for change/denial: _____

Total estimated personnel hours: _____

Title: _____ Print name: _____ Signature: _____

TO BE COMPLETED BY NPPD PERSONNEL ONLY IF APPLICABLE:

SUNY New Paltz Police Dept.: (Print) _____ (Sign) _____ Date _____

New Paltz Rescue Squad: (Print) _____ (Sign) _____ Date _____

New Paltz Fire Dept.: (Print) _____ (Sign) _____ Date _____

Sign-Off #2

Village Highway Dept.: ___ Approved ___ Denied ___ Date: _____ Signature: _____

Village Board: ___ Approved ___ Denied ___ Date: _____ Signature: _____

Reason for denial: _____

Sign-Off #3

Town Board: ___ Approved ___ Denied ___ Date: _____

Reason for denial: _____

Supervisor's Signature: _____ Date: _____

Dear Town of New Paltz,

As a means of introduction my name is Mike Vance and I am the race director for the SOS4Kids Youth Triathlon put on by NYTA (the organizers of the Survival of the Shawangunks SOS). We are busy putting together the details for our 6th triathlon this summer. We are fortunate to have the cooperation of many people and organizations which allows us to provide a safe and healthy experience for 100 kids in our community. We are once again asking to have the swim portion of the race held at Moriello Pool (we already are working closely with Mr. Russell and he has been notified about the race).

Course Description:

Athletes will begin the race by swimming 200 meters in the pool, before they exit and head out for a 1 mile long run on the rail trail. After completing the run they will mount their bikes located at the Huguenot Street Nursery School parking lot. They will ride a total of 4 miles on Huguenot Street and Old Kingston Rd. The athletes will return to the parking lot at the Huguenot Street Playschool, dismount their bikes, and run .25 miles to the finish line located on Broadhead.

Race Date:

Saturday August 8th

Start Time:

8:00 AM

Each year the USAT sanctions the race and provides us with insurance certificates. We have filled the paper work with them and sent in our payment. Once I have the certificates in hand I will bring them to the Town hall to complete the parade application process.

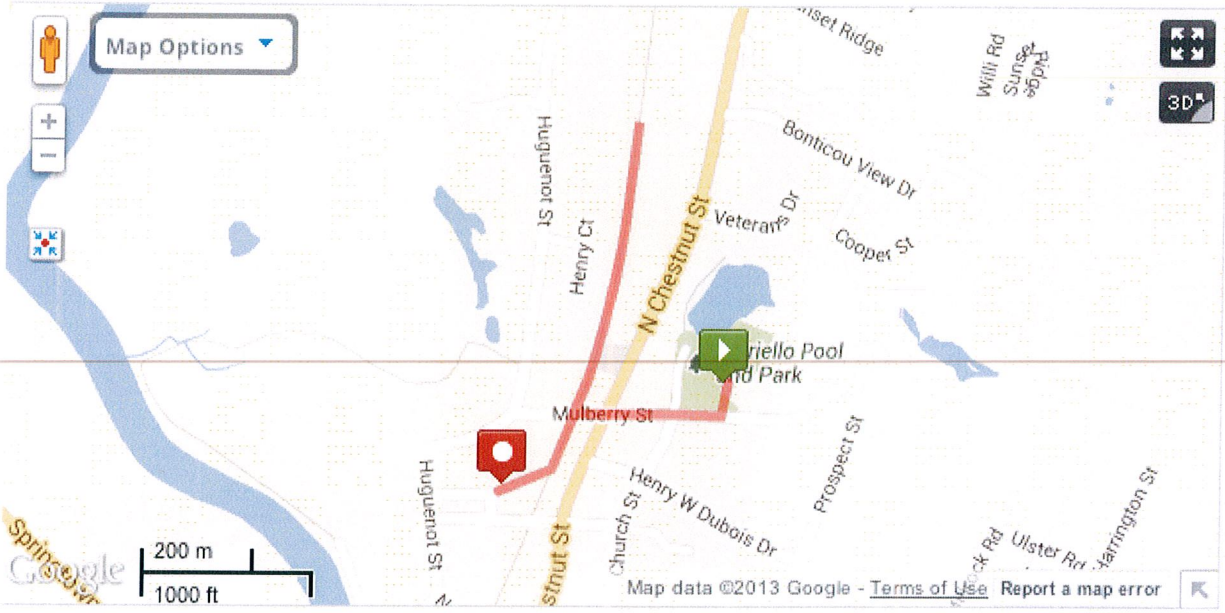
 *attached*

Thank You,

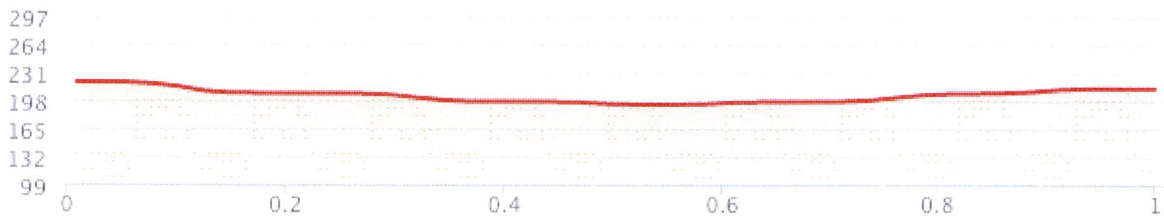


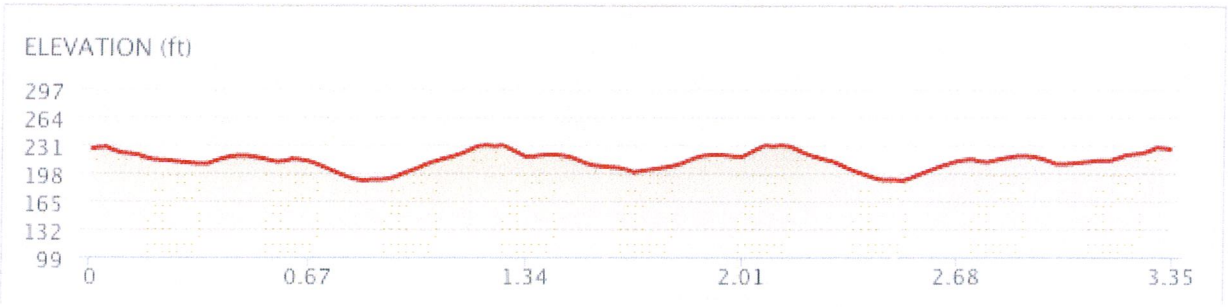
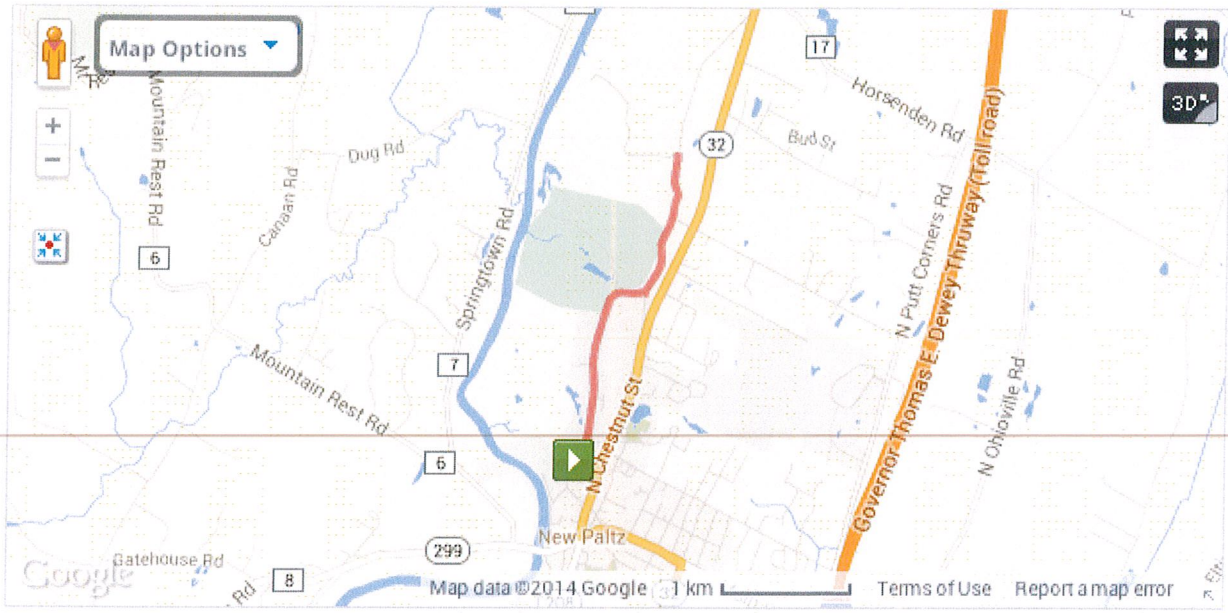
Mike Vance

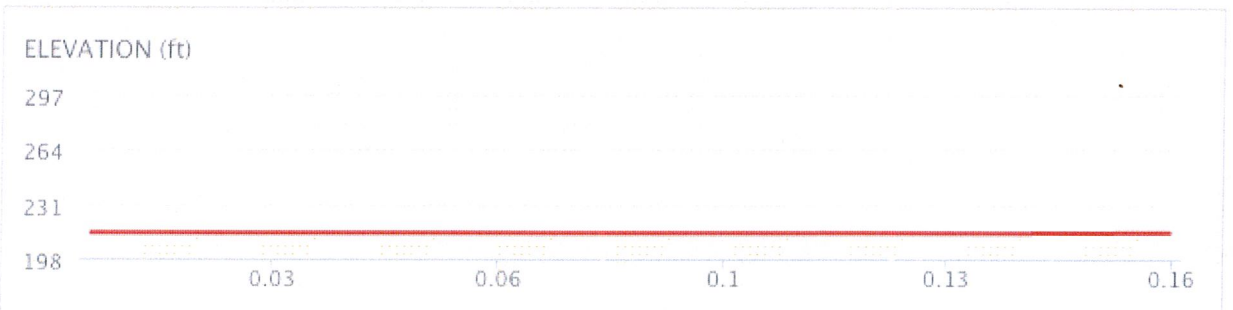
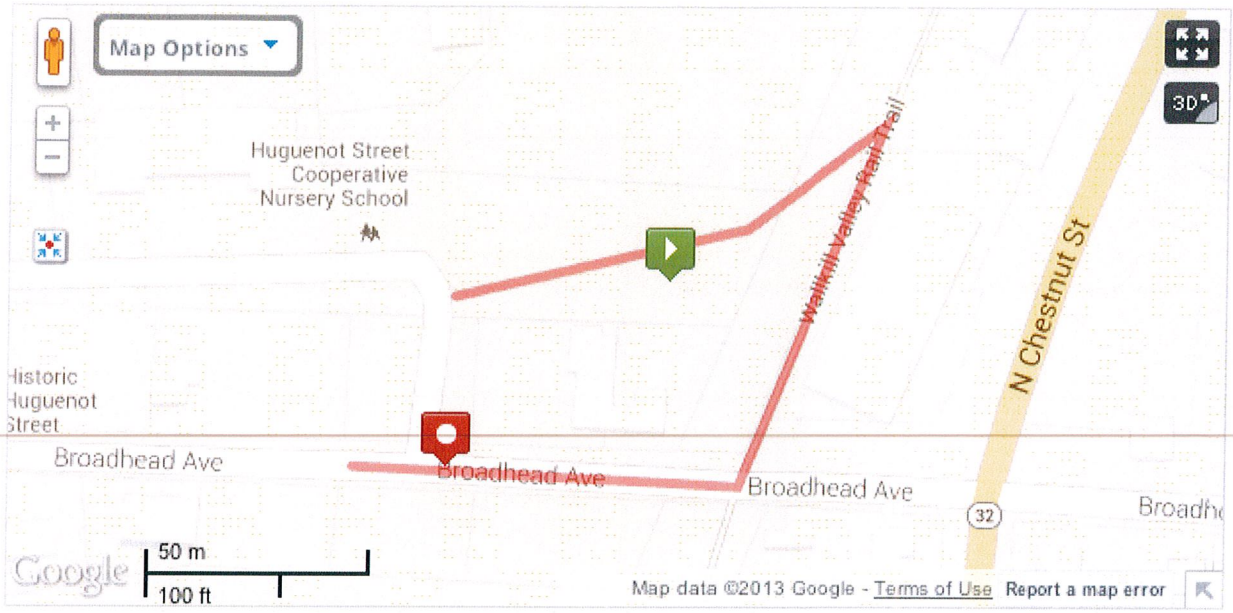
NYTA Race Director for SOS4KIDS



ELEVATION (ft)







CERTIFICATE OF INSURANCE

DATE: 5/18/2015

CERTIFICATE NUMBER: 20150427332370

AGENCY:

ESIX 3 LLC
d/b/a Entertainment & Sports Insurance eXperts (ESIX)
d/b/a Entertainment and Sports Insurance Agency (California)
2727 Paces Ferry Road, Building Two, Suite 1500
Atlanta, GA 30339
678-324-3300 (Telephone)
678-324-3303 (Facsimile)

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 BELOW.

NAMED INSURED:

USA Triathlon of Colorado
5825 Delmonico Drive
Colorado Springs CO 80919-2401

Michael Vance

INSURERS AFFORDING COVERAGE:

INSURER A: Everest National Insurance Company
INSURER B: Everest National Insurance Company

EVENT INFORMATION:

2015 SOS4KIDS (8/9/2015 - 8/9/2015)

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 LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INS	TYPE OF INSURANCE:	POLICY NUMBER(S):	EFFECTIVE:	EXPIRES:	LIMITS:	
A	GENERAL LIABILITY					
X	Occurrence	SI8ML00212-141	12/1/2014 12:01 AM	12/1/2015 12:01 AM	GENERAL AGGREGATE (Applies Per Event)	\$2,000,000
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	\$2,000,000
B	UMBRELLA/EXCESS LIABILITY					
X	Occurrence	SI8EX00179-141	12/1/2014 12:01 AM	12/1/2015 12:01 AM	AGGREGATE	\$10,000,000
					EACH OCCURRENCE	\$10,000,000

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

Coverage applies to the USA Triathlon sanctioned or approved event specified on this certificate.

The certificate holder is an additional insured as per form ECG20600: Additional Insured - Automatic Status When Required in a Written Agreement.

The General Liability policy is primary as per Form CG0001.

The General Liability policy contains a Waiver of Subrogation provision as required by written agreement per Form ECG24522.

CERTIFICATE HOLDER:

Town of New Paltz
3 Clearwater Road, PO Box 550
New Paltz NY 12561

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:

