

REQUEST FOR EVENT

GM&O Rails-to-Trails Recreational District of North Mississippi
P.O. Box 690, 75 South Main Street - Pontotoc, MS 38863 – Phone 662-489-2415

Sponsor(s): _____

Contact Person: _____

Address: _____

Telephone: _____ Email: _____

Name of Event: _____

Proposed Route of Event: _____

Proposed Date of Event: _____ Approx. # of participants: _____

Type of Event (Walk, Run, Bicycle Tour, Bicycle Race, etc.): _____

(Any and all approved events recognized pursuant to this REQUEST FOR EVENT on the Tanglefoot Trail™ shall be limited only to organized activities of a recreational nature, including those examples listed above, and shall be in furtherance of the stated purpose and policies of the GM&O Rails-to-Trail Recreational District of North Mississippi.)

Proposed Event Time: Registration _____ Begin _____ End _____

Safety Considerations/Plan (Attach additional page if necessary): _____

Other Requirements/Information (Attach additional page if necessary) _____

Aid Stations and Locations: _____

NOTE:

• In any event in which a sponsor solicits and /or registers participants, the sponsor must provide general and automobile liability insurance (as required) in the amount equal to or greater than one million dollars (\$1,000,000), naming both the sponsor and the GM&O Rails-to Trails Recreational District of North MS as additional insured with waiver of subrogation.

• Any trail markings should receive prior approval from the District and must be non-permanent. Other signs and garbage/trash generated by the event must be removed by Sponsor.

• Sponsor agrees to pay the GM&O Rails to-Trails Recreational District of North MS (CIRCLE ONE: ten per cent (10%) or a minimum of Five Dollars (\$5.00) of each registration fee collected) within one week of the conclusion of the event. If event does not require participants to register, there shall be a Fifty Dollar (\$50.00) fixed fee due from Sponsor upon event approval.

I/We agree to abide by the above requirements if this REQUEST for EVENT is approved.

Applicant's Name (Please Print) _____ Applicant's Signature _____

Phone: _____ Date: _____

Approved by: _____ Date: _____

Special Note: Any restrictions or qualified approval requirements shall be attached to this REQUEST FOR EVENT.