



## Event Committee Meeting Meeting Agenda

April 25, 2024

1. **ROLL CALL**
2. **APPROVAL OF MINUTES**
  - a. Approval of March 28, 2024 minutes
3. **OLD BUSINESS**
4. **NEW BUSINESS**
  - a. Deadwood Lead 76ers Summer Swim Practice - May - August, 2024.
  - b. The Big Mick - June 15, 2024
  - c. Bev's Poker Run - June 23, 2024
5. **REFUNDS**
  - a. Snocross - January 26-27, 2024 - payment was received on April 8.
6. **UPCOMING EVENTS**
  - a. Hops and Hogs - May 17 & 18 - open container.
  - b. Back When They Bucked - May 22 through 29 - open container, use of event complex.
  - c. Summer Kick Off Concerts - May 24 & 25 - open container, street closure.
  - d. Mickelson Marathon - June 1 & 2 - use of Sherman Street lot.
  - e. Mickelson Trail Post Pary - June 2 - open container.
7. **OPEN DISCUSSION**
8. **MEETING ADJOURNMENT**
  - a. Next meeting will be Thursday, May 30, 2024 at 10:00 a.m.

**CITY OF DEADWOOD  
EVENT COMMITTEE  
March 28, 2024**

**Roll Call:**

The City of Deadwood Event Committee met Thursday March 28, 2024 in the Century Room in City Hall. Charlie Struble called the meeting to order at 10:00 a.m. Present were Charlie Struble, Randy Adler, Michelle Fischer, Alex Hamann, Sarah Kryger, Louie LaLonde, Jim Lee, Tom Riley, Bobby Rock, Cory Shafer, Rose Speirs, Lornie Stalder and Misty Trehwella.

**Approval Of Minutes**

Minutes of the meeting on February 29, 2024, were approved by Mr. Riley, second by Mrs. Speirs; motion carried unanimously.

**New Business:****1. Lead Deadwood Youth Soccer – March 25 through May 30, 2024**

Ms. Trehwella stated reoccurring event, requesting use of public property at Event Complex. Mrs. Kryger moved to approve, second by Mrs. LaLonde; motion carried unanimously.

**2. Mickelson Trail Post Race Party – June 2, 2024**

Mr. Rock stated reoccurring event, requesting open container in Zone 4 from 1:00 p.m. to 6:00 p.m. Mrs. LaLonde moved to approve, second by Mrs. Kryger; motion carried unanimously.

**3. PBR – June 6-7, 2024**

Mrs. Kryger stated reoccurring event, requesting open container, use of Event Complex, Discussion was held concerning fees and pyrotechnics. Mrs. Speirs moved to approve, second by Mr. Adler; motion carried unanimously.

**4. NAJA Shrine Circus- June 21-22, 2024**

Mrs. Kryger stated reoccurring event, requesting use of Event Complex. Mr. Rock moved to approve, second by Mrs. Kryger; motion carried unanimously.

**5. Weekend Freedom Concerts – July 5-6, 2024**

Mr. Rock spoke about the event, requesting open container, use of Siever Street and street closure. Mrs. Kryger moved to approve, second by Mrs. Speirs; motion carried unanimously.

**6. Days of '76 Rodeo and Parade – July 17 through July 20, 2024**

Mrs. Kryger stated reoccurring event, requesting open container, street closure, use of Welcome Center and waiver of user fees. Travis Rogers, Days of '76 committee, spoke about the event. Discussion was held concerning use of Welcome Center and security. Mr. Kryger moved to approve, second by Mr. Stalder; motion carried unanimously.

**7. Lead Deadwood Youth Football and Cheer – August 1 through October 30, 2024**

Discussion was held concerning other events and dates. Mr. Rock moved to approve, second by Mr. Adler; motion carried unanimously.

**8. Harley Davidson Outlaw Square Activation – August 1 through August 11, 2024**

Mr. Rock stated reoccurring event, requesting open container. Discussion was held concerning Deadwood Street closure. Mrs. Kryger moved to approve, second by Mr. Adler; motion carried unanimously.

**9. Mustang Rally – August 29, 2024**

Mrs. Kryger stated reoccurring event, requesting street closure on Main Street. Much discussion concerning stagecoach and street closure. Committee suggests Deadwood Alive and Sturgis Mustang Rally work together on times for the street closure in 2025. Mrs. Speirs moved to approve, second by Mrs. Kryger. Roll Call: Aye – Struble, Adler, Fischer, Kryger, LaLonde, Lee, Riley, Rock, Shafer, Speirs, Stalder, Trehwella. Nay - Hamann. Motion carried.

**10. Deadwood Jam – September 13-14, 2024**

Mrs. Kryger stated reoccurring event, requesting open container, use of Siever Street and street closure. Mrs. Speirs moved to approve, second by Mrs. LaLonde; motion carried unanimously.

**11. Jeep Jamboree – September 19-21, 2024**

Mrs. Kryger stated reoccurring event, requesting use of public property at Event Complex. Mrs. Kryger moved to approve, second by Mr. Rock; motion carried unanimously.

**12. Oktoberfest – October 4-5, 2024**

Mrs. Kryger stated reoccurring event, requesting open container and street closure. Mrs. LaLonde moved to approve, second by Mrs. Spiers; motion carried unanimously.

**13. Wild West Songwriters – October 17-19, 2023**

Mrs. Kryger stated reoccurring event, requesting open container. Mrs. LaLonde moved to approve, second by Mr. Adler; motion carried unanimously.

#### **14. Deadweird/Trunk or Treat – October 25-26, 2024**

Mrs. Kryger stated reoccurring event, requesting open container, street closure and use of public property at Event Complex. Mrs. Speirs moved to approve, second by Mrs. LaLonde; motion carried unanimously.

#### **Refunds:**

##### **1. Snocross – January 26-27, 2024** (continued from February 29, 2024)

Discussion was held concerning deposit. Mr. Stalder moved to continue, second by Mr. Hamann; motion carried unanimously.

#### **Upcoming Events:**

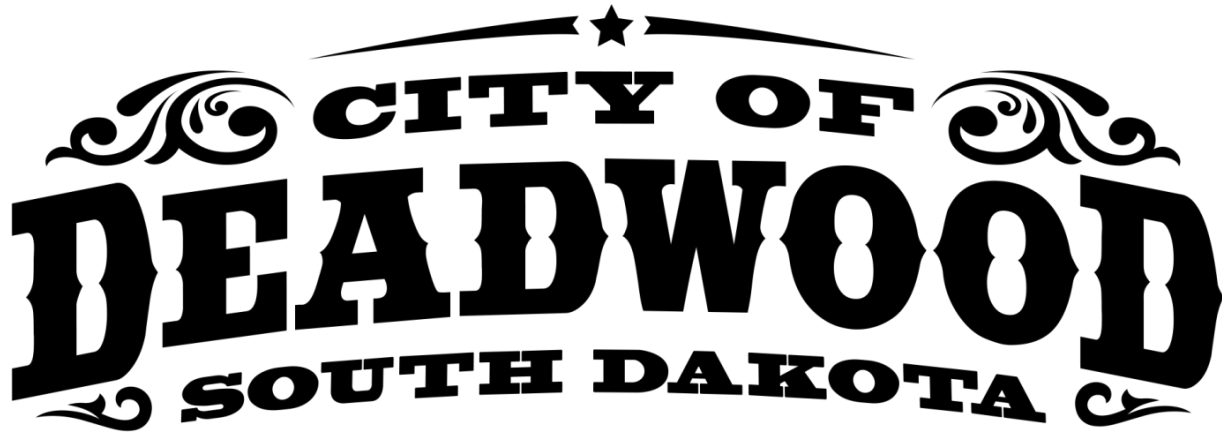
1. Forks, Corks and Kegs – April 12-13 – Open Container

#### **Open Discussion**

1. Black Hills Redemption discussion. Possible riding the trolley between Lead and Deadwood.
2. Mr. Stalder spoke about the streetlights around town. Possible changing the lights for events.
3. Mr. Stalder gave an update on the trailhead lot and Sherman Street lot.

#### **Meeting Adjournment:**

With no further business for the committee to consider, Mrs. Speirs moved, second by Mr. Rock to adjourn. The next Event Committee meeting will be **Thursday, April 25, 2024 at 10:00 a.m.**



# City of Deadwood Special Event Permit Application and Facility Use Agreement for

Deadwood Lead 76ers Swim Team Practice

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**Instructions:**

To apply for a Special Event Permit, please read the Special Event Permit Application Instructions and then complete this application. Submit your application, including required attachments, no later than forty-five (45) days before your event. Facility Use Agreements should also be completed at this time (if applicable).

Adopted June 1, 2023

### EVENT INFORMATION

<input type="checkbox"/> Run	<input type="checkbox"/> Walk	<input type="checkbox"/> Bike Tour	<input type="checkbox"/> Bike Race	<input type="checkbox"/> Parade	<input type="checkbox"/> Concert
<input type="checkbox"/> Street Fair	<input type="checkbox"/> Triathlon	<input checked="" type="checkbox"/> Other			

Event Title: Deadwood Lead 76ers Swim Team Practice

Event Date(s): May 2024 (month, day, year) Total Anticipated Attendance: August 2024

(# of Participants \_\_\_\_\_ # of Spectators \_\_\_\_\_)

Actual Event Hours: (from: 9:30 a.m. AM / PM (to): noon AM / PM

Location / Staging Area: Swimming Pool

Set up/assembly/construction \_\_\_\_\_ Start time: \_\_\_\_\_ AM / PM

Please describe the scope of your setup / assembly work (specific details):  
Use of 2-3 lanes Monday-Friday, May 13-May 24 will be after school 3:30 to 6:30.  
Mondays and Wednesdays 9:30 a.m. to noon, Tuesday, Thursday, Friday 10:00 to noon

Dismantle Date: \_\_\_\_\_ Completion time: \_\_\_\_\_ AM / PM

List any street(s) requiring closure as a result of this event. Include **street name(s), day, date** and **time** of closing and time of re-opening: \_\_\_\_\_

- Any request involving 25 or less motor vehicles will utilize Deadwood Street and will be barricaded at both ends of Deadwood Street.
- Any request involving 25-50 motor vehicles (not including motorcycles) - will park on the north side of Main Street, which will not require street closure.
- Any request involving 50 or more vehicles (which would require an entire street closure From Wall Street to Shine Street and security must be provided at Shine Street and Main Street and Wall Street and Main Street to direct traffic.
- Additional security maybe required at the discretion of the Event Committee.

### OPEN CONTAINER

<https://www.cityofdeadwood.com/planning/page/special-event-open-container-information-and-maps>

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Adopted June 1, 2023

**APPLICANT AND SPONSORING ORGANIZATION INFORMATION** Commercial (for profit) Noncommercial (nonprofit)Sponsoring Organization: Deadwood Lead 76ers Swim TeamChief Officer of Organization (NAME): Stephenie Campbell, Misty Trehwella, Sarah DirksenApplicant (NAME): Misty Trehwella Business Phone: (\_\_\_\_\_) \_\_\_\_\_Address: \_\_\_\_\_  
(city) (state) (zip code)Daytime phone: (605) 641-4549 Evening Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_\_) \_\_\_\_\_Please list any **professional event organizer** or **event service provider** hired by you that is authorized to work on your behalf to produce this event.

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(city) (state) (zip code)Contact person "on site" day of event or facility use Sarah Pager/Cell #: \_\_\_\_\_**(Note:** This person must be in attendance for the duration of the event and immediately available to city officials)**REQUIRED:** Attach a written communication from the Chief Officer of the organization which authorizes the applicant or professional event organizer to apply for this Special Event Permit on their behalf.**FEES / PROCEEDS / REPORTING**

- | NO                                  | YES                                 |  |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Is your organization a "Tax Exempt, nonprofit" organization? If <b>YES</b> , you must attach a copy of your IRS 501C Tax Exemption Letter to this Special Event Permit application (providing proof and certifying your current tax exempt, nonprofit status). |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Are admission, entry, vendor or participant fees required? If <b>YES</b> , please explain the purpose and provide amount(s): _____<br>_____<br>_____   |





In addition to the route map required above, please attach a diagram showing the overall lay-out and set-up locations for the following items:

- Alcoholic and Non-alcoholic Concession and / or Beer Garden Areas.

- Food Concession and / or Food Preparation Area(s).

Please describe how food will be served at the event: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

If you intend to cook food in the event area, please specify the method to be used:

GAS       ELECTRIC       CHARCOAL       OTHER(SPECIFY): \_\_\_\_\_

- First Aid Facilities and Ambulance locations.
- Tables and Chairs.
- Fencing, Barriers and / or Barricades.
- Generator Locations and / or Source of Electricity.
- Canopies or Tent Locations.
- Booths, Exhibits, Displays or Enclosures.
- Scaffolding, Bleachers, Platforms, Stages, Grandstands or Related Structures.
- Vehicles and / or Trailers.
- Trash Containers and Dumpsters.

(NOTE): You must properly dispose of waste and garbage throughout the term of your event and immediately upon conclusion of the event, the area must be returned to a clean condition.

Number of trash cans: \_\_\_\_\_      Trash Containers w / lids: \_\_\_\_\_

Describe your plan for clean-up and removal of waste and garbage during and after the event or use of facility: \_\_\_\_\_  
 \_\_\_\_\_

Other Related Event Components not covered above. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## SAFETY / SECURITY / ACCESSIBILITY

Please describe your procedures for both **Crowd Control** and **Internal Security**: \_\_\_\_\_

\_\_\_\_\_

Please describe your Accessibility Plan for access at your event by individuals with disabilities: \_\_\_\_\_

\_\_\_\_\_

**REQUIRED: It is the applicant's responsibility to comply with all City, County, State and Federal Disability Access Requirements applicable to this event.**

NO      YES



Have you hired any Professional Security organization to handle security arrangements for this event? If **YES**, please list:

Security Organization: \_\_\_\_\_

Security Organization Address: \_\_\_\_\_

(city)

(state)

(zip code)

Security Director (Name): \_\_\_\_\_ Business phone: \_\_\_\_\_

NO      YES



Is this a night event? If **YES**, please state how the event and surrounding area will be illuminated to ensure the safety of the participants and spectators: \_\_\_\_\_

\_\_\_\_\_

Please indicate what arrangements you have made for providing **First Aid Staffing and Equipment**?

Number \_\_\_\_\_ Ambulance(s) – How provided? \_\_\_\_\_

Number \_\_\_\_\_ Emergency Medical Technicians – How provided? \_\_\_\_\_

APPLICANT specifically acknowledges and agrees that it shall be solely responsible for any damage to personal property located in or stored in or upon DEADWOOD's property pursuant to the activity for which approval is being sought and that DEADWOOD shall not be responsible for any damage or loss to or of APPLICANT's property which results from any cause or reason with regard to personal property owned by APPLICANT stored or located on DEADWOOD's property pursuant to approval of the activity for which approval is being sought herein.

Acknowledge acceptance with initial: MT

APPLICANT agrees to hold DEADWOOD harmless and indemnify DEADWOOD from any sums of money which DEADWOOD might have to pay to any person as a result of property damage, personal injury or death resulting from APPLICANT's use of the City property pursuant to approval of the activity for which approval is being sought herein.

Acknowledge acceptance with initial: MT

Adopted June 1, 2023

## PARKING PLAN / SHUTTLE PLAN / MITIGATION OF IMPACT

Please describe your plans to notify all residents, businesses and churches impacted by the event: \_\_\_\_\_

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## ENTERTAINMENT / ATTRACTIONS / RELATED EVENT ACTIVITIES

NO      YES

- Are there any **musical entertainment** features related to your event or facilities rental? If **YES**, please state the number of bands and type of music.

Number of Stages: \_\_\_\_\_ Number of Bands: \_\_\_\_\_

Type of Music: \_\_\_\_\_

- Will **sound amplification** be used?  
If **YES**, please indicate: Start Time: \_\_\_\_\_ AM / PM – Finish Time: \_\_\_\_\_ AM / PM

- Will **sound check** be conducted prior to the event?  
If **YES**, please indicate: Start Time: \_\_\_\_\_ AM / PM – Finish Time: \_\_\_\_\_ AM / PM

Please describe the sound equipment that will be used for your event: \_\_\_\_\_

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- Will any fireworks, rockets or other pyrotechnics be used? If **YES**, please attach a copy of your permit (issued by the State Fire Marshall's office) to this application.

- Are any signs, banners decorations or special lighting be used? If **YES**, please describe: \_\_\_\_\_

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## PROMOTION / ADVERTISING / MARKETING / INTERNET INFORMATION

NO      YES

- Will this event be promoted, advertised or marketed in any manner? If **YES**, please describe:

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NO      YES

- Will there be any live media coverage during your event? If **YES**, please explain:

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Refer all event public inquiries and / or media inquiries for this event to:

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

Adopted June 1, 2023

### INSURANCE REQUIREMENTS/LIQUOR LIABILITY

**REQUIRED:** Insurance for your event will be required before final permit approval.

Name of Insurance Company: \_\_\_\_\_

Agent’s Name: \_\_\_\_\_

Business Phone: (\_\_\_\_)\_\_\_\_\_ Policy Number: \_\_\_\_\_ Policy Type: \_\_\_\_\_

Address: \_\_\_\_\_

(city) (state) (zip code)

For final permit approval, you will need commercial general liability insurance that names “the City of Deadwood, its officers, employees and agents” as an additional insured. Insurance coverage must be maintained for the duration of the event. To determine the amount of insurance coverage necessary, please contact the Finance Office at (605) 578-2600 – Fax # (605) 578-2084.

The City must be named as an “additional insured.” Please obtain the required insurance and mail an original insurance certificate to: **City of Deadwood, Finance Office, 102 Sherman Street, Deadwood, SD 57732.**

### AFFIDAVIT OF APPLICANT

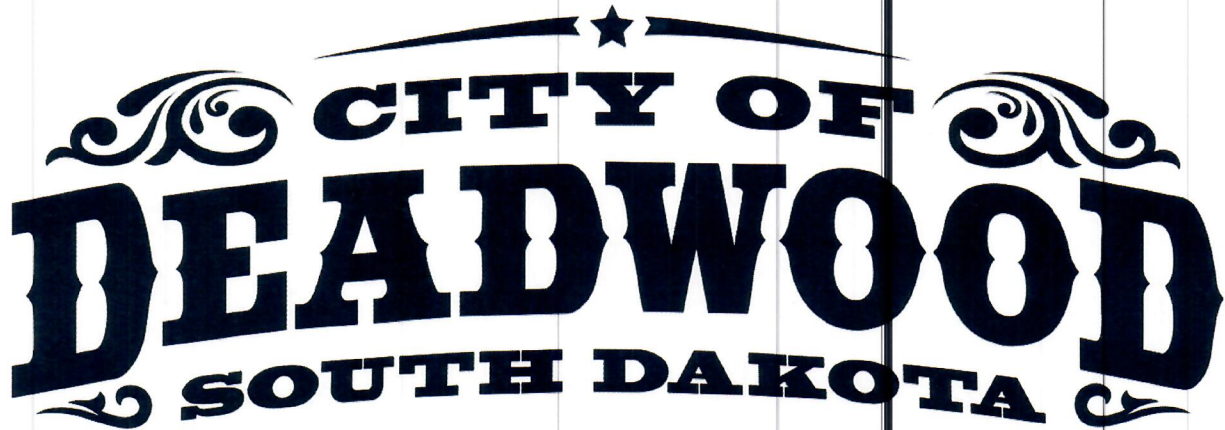
**Advance Cancellation Notice Required:** If this event is cancelled, notify the Deadwood Police Department. Otherwise, City personnel and equipment may be needlessly dispatched.

I certify that the information in the foregoing application is true and correct to the best of my knowledge and belief and that I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event and I understand that this application is made subject to the rules and regulations established by the City Commission of Deadwood. I agree to abide by these rules and further certify that I, on behalf of the organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the Event to the City of Deadwood.

Name of Applicant (PRINT): Misty Trehwella Title: Treasurer/Admin Official

Misty Trehwella Digitally signed by Misty Trehwella  
Date: 2024.04.23 11:46:54 -06'00' Date: 4/21/2024

(Signature of Applicant/Sponsoring Organization)



**City of Deadwood  
Special Event  
Permit Application and  
Facility Use  
Agreement for**

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**Instructions:**

To apply for a Special Event Permit, please read the Special Event Permit Application Instructions and then complete this application. Submit your application, including required attachments, no later than forty-five (45) days before your event. Facility Use Agreements should also be completed at this time (if applicable).

Adopted June 1, 2023

### EVENT INFORMATION

<input type="checkbox"/> Run	<input type="checkbox"/> Walk	<input checked="" type="checkbox"/> Bike Tour	<input type="checkbox"/> Bike Race	<input type="checkbox"/> Parade	<input type="checkbox"/> Concert
<input type="checkbox"/> Street Fair	<input type="checkbox"/> Triathlon	<input type="checkbox"/> Other			

Event Title: The Big Mick

Event Date(s): 6/15/2024 Total Anticipated Attendance: 100  
(month, day, year)

5:00 PM - 7:00 PM 6/14/24 (# of Participants 100 # of Spectators X)

Actual Event Hours: (from: 4:30 AM / PM (to): 7:00 AM / PM  
Sherman Street Lot

Location / Staging Area: Parking lot \* Mickelson Trail trailhead

Set up/assembly/construction 6/15/24 Start time: 5:00 AM / PM

Please describe the scope of your setup / assembly work (specific details): Event coordinators - 2 vehicles in parking lot will hand out registration bags. On 6/15/24 - cyclists gather at trailhead - then set out on Mickelson Trail all on trail by 7a

Dismantle Date: 6/15/2024 Completion time: 7:00 AM / PM

List any street(s) requiring closure as a result of this event. Include **street name(s), day, date** and **time** of closing and time of re-opening: 711 - cyclists will park at trailhead lot & retrieve vehicles by 10pm on 6/15/24

- Any request involving 25 or less motor vehicles will utilize Deadwood Street and will be barricaded at both ends of Deadwood Street.
- Any request involving 25-50 motor vehicles (not including motorcycles) - will park on the north side of Main Street, which will not require street closure.
- Any request involving 50 or more vehicles (which would require an entire street closure From Wall Street to Shine Street and security must be provided at Shine Street and Main Street and Wall Street and Main Street to direct traffic.
- Additional security maybe required at the discretion of the Event Committee.

### OPEN CONTAINER

<https://www.cityofdeadwood.com/planning/page/special-event-open-container-information-and-maps>

Date: _____	Times: _____	Zone: _____
Date: _____	Times: _____	Zone: _____
Date: _____	Times: _____	Zone: _____
Date: _____	Times: _____	Zone: _____
Date: _____	Times: _____	Zone: _____

Adopted June 1, 2023



**APPLICANT AND SPONSORING ORGANIZATION INFORMATION**

Commercial (for profit)  Noncommercial (nonprofit)

Sponsoring Organization: Mickelson Trail Affiliates, LLC

Chief Officer of Organization (NAME): Ann Cunningham

Applicant (NAME): Ann Cunningham Business Phone: (605) 440-2400

Address: PO Box 6038 Custer SD 57730  
(city) (state) (zip code)

Daytime phone: (605) 440-2400 Evening Phone: ( ) same Fax #: ( )

Please list any **professional event organizer** or **event service provider** hired by you that is authorized to work on your behalf to produce this event.

Name: n/a

Address: \_\_\_\_\_  
(city) (state) (zip code)

Contact person "on site" day of event or facility use Ann Cunningham Pager/Cell #: 605-440-2400

**(Note:** This person must be in attendance for the duration of the event and immediately available to city officials)

**REQUIRED:** Attach a written communication from the Chief Officer of the organization which authorizes the applicant or professional event organizer to apply for this Special Event Permit on their behalf.

**FEES / PROCEEDS / REPORTING**

NO  YES  Is your organization a "Tax Exempt, nonprofit" organization? If YES, you must attach a copy of your IRS 501C Tax Exemption Letter to this Special Event Permit application (providing proof and certifying your current tax exempt, nonprofit status).

Are admission, entry, vendor or participant fees required? If YES, please explain the purpose and provide amount(s): admission fees are all prepaid - no funds exchanged on 6/15/24  
Riders register online

**OVERALL EVENT DESCRIPTION:  
ROUTE MAP/ SITE DIAGRAM/ SANITATION**

Please provide a **detailed description** of your proposed event. Include details regarding any components of your event such as use of vehicles, animals, rides or any other pertinent information about the event:

The Big Mick is an annual cycling event on the George V. Mickelson Trail  
Up ~~to~~ to 100 cyclists will ride from Deadwood to Edgemont, on the Mickelson Trail - in one day

**OVERALL EVENT / FACILITIES RENTAL DESCRIPTION (CONTINUED)**

- NO  YES  Does the event involve the sale or use of alcoholic beverages? If **YES**, please provide your liquor liability insurance information to the last page of this application.
- Will items or services be sold at the event? If **YES**, please describe: \_\_\_\_\_
- Does this event involve a moving route of any kind along streets, sidewalks, or highways? If **YES**, attach a detailed map of your proposed route, indicating the direction of travel and provide written narrative to explain your route.
- Does this event involve a fixed venue site? If **YES**, attach a detailed site map showing all street impacted by the event.

Adopted June 1, 2023



In addition to the route map required above, please attach a diagram showing the overall lay-out and set-up locations for the following items:

- Alcoholic and Non-alcoholic Concession and / or Beer Garden Areas.
- Food Concession and / or Food Preparation Area(s).

Please describe how food will be served at the event: none

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If you intend to cook food in the event area, please specify the method to be used:

GAS       ELECTRIC       CHARCOAL       OTHER(SPECIFY): \_\_\_\_\_

- First Aid Facilities and Ambulance locations.
- Tables and Chairs.
- Fencing, Barriers and / or Barricades.
- Generator Locations and / or Source of Electricity.
- Canopies or Tent Locations.
- Booths, Exhibits, Displays or Enclosures.
- Scaffolding, Bleachers, Platforms, Stages, Grandstands or Related Structures.
- Vehicles and / or Trailers.
- Trash Containers and Dumpsters.

(NOTE): You must properly dispose of waste and garbage throughout the term of your event and immediately upon conclusion of the event, the area must be returned to a clean condition.

Number of trash cans: 0      Trash Containers w/ lids: 0

Describe your plan for clean-up and removal of waste and garbage during and after the event or use of facility: n/a - site needed strictly for parking & handing out registration packets

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Other Related Event Components not covered above. n/a

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### SAFETY / SECURITY / ACCESSIBILITY

Please describe your procedures for both **Crowd Control** and **Internal Security**: n/a

Please describe your Accessibility Plan for access at your event by individuals with disabilities: n/a

**REQUIRED: It is the applicant's responsibility to comply with all City, County, State and Federal Disability Access Requirements applicable to this event.**

NO  YES  Have you hired any Professional Security organization to handle security arrangements for this event? If **YES**, please list:

Security Organization: \_\_\_\_\_

Security Organization Address: \_\_\_\_\_ (city) (state) (zip code)

Security Director (Name): \_\_\_\_\_ Business phone: \_\_\_\_\_

NO  YES  Is this a night event? If **YES**, please state how the event and surrounding area will be illuminated to ensure the safety of the participants and spectators: \_\_\_\_\_

Please indicate what arrangements you have made for providing **First Aid Staffing and Equipment**? volunteers on site

Number 0 Ambulance(s) – How provided? \_\_\_\_\_

Number 0 Emergency Medical Technicians – How provided? \_\_\_\_\_

APPLICANT specifically acknowledges and agrees that it shall be solely responsible for any damage to personal property located in or stored in or upon DEADWOOD's property pursuant to the activity for which approval is being sought and that DEADWOOD shall not be responsible for any damage or loss to or of APPLICANT's property which results from any cause or reason with regard to personal property owned by APPLICANT stored or located on DEADWOOD's property pursuant to approval of the activity for which approval is being sought herein.

Acknowledge acceptance with initials: [Signature]

APPLICANT agrees to hold DEADWOOD harmless and indemnify DEADWOOD from any sums of money which DEADWOOD might have to pay to any person as a result of property damage, personal injury or death resulting from APPLICANT's use of the City property pursuant to approval of the activity for which approval is being sought herein.

Acknowledge acceptance with initials: [Signature]

Adopted June 1, 2023

### PARKING PLAN / SHUTTLE PLAN / MITIGATION OF IMPACT

Please describe your plans to notify all residents, businesses and churches impacted by the event:

*Big Mick event will not impact businesses or residents*

### ENTERTAINMENT / ATTRACTIONS / RELATED EVENT ACTIVITIES

NO YES

Are there any **musical entertainment** features related to your event or facilities rental? If **YES**, please state the number of bands and type of music.

Number of Stages: \_\_\_\_\_

Number of Bands: \_\_\_\_\_

Type of Music: \_\_\_\_\_

Will **sound amplification** be used?  
If **YES**, please indicate: Start Time: \_\_\_\_\_ AM / PM – Finish Time: \_\_\_\_\_ AM / PM

Will **sound check** be conducted prior to the event?  
If **YES**, please indicate: Start Time: \_\_\_\_\_ AM / PM – Finish Time: \_\_\_\_\_ AM / PM

Please describe the sound equipment that will be used for your event: \_\_\_\_\_

Will any fireworks, rockets or other pyrotechnics be used? If **YES**, please attach a copy of your permit (issued by the State Fire Marshall's office) to this application.

Are any signs, banners decorations or special lighting be used? If **YES**, please describe: \_\_\_\_\_

### PROMOTION / ADVERTISING / MARKETING / INTERNET INFORMATION

NO YES

Will this event be promoted, advertised or marketed in any manner? If **YES**, please describe:  
*Online*

NO YES

Will there be any live media coverage during your event? If **YES**, please explain:

Refer all event public inquiries and / or media inquiries for this event to:

NAME: *Ann Cunningham*

PHONE: *605-440-2400*

Adopted June 1, 2023



### INSURANCE REQUIREMENTS/LIQUOR LIABILITY

**REQUIRED:** Insurance for your event will be required before final permit approval.

Name of Insurance Company: Black Hills Insurance

Agent's Name: Jesse Carr

Business Phone: (605) 346-5555 Policy Number: issued wk prior Policy Type: gen ~~liability~~ liability

Address: 800 St Joseph St. Rapid City (city) SD (state) 57701 (zip code)

For final permit approval, you will need commercial general liability insurance that names "the City of Deadwood, its officers, employees and agents" as an additional insured. Insurance coverage must be maintained for the duration of the event. To determine the amount of insurance coverage necessary, please contact the Finance Office at (605) 578-2600 – Fax # (605) 578-2084.

The City must be named as an "additional insured." Please obtain the required insurance and mail an original insurance certificate to: City of Deadwood, Finance Office, 102 Sherman Street, Deadwood, SD 57732.

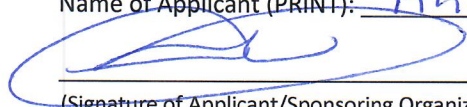
### AFFIDAVIT OF APPLICANT

**Advance Cancellation Notice Required:** If this event is cancelled, notify the Deadwood Police Department. Otherwise, City personnel and equipment may be needlessly dispatched.

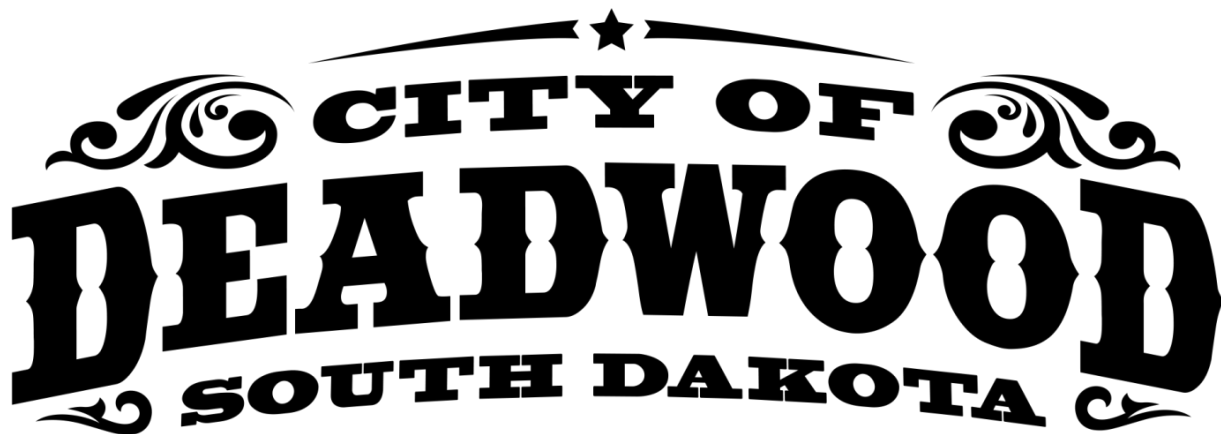
I certify that the information in the foregoing application is true and correct to the best of my knowledge and belief and that I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event and I understand that this application is made subject to the rules and regulations established by the City Commission of Deadwood. I agree to abide by these rules and further certify that I, on behalf of the organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the Event to the City of Deadwood.

Name of Applicant (PRINT): Ann Cunningham

Title: Event Coordinator

  
(Signature of Applicant/Sponsoring Organization)

Date: 4/24/24



# **City of Deadwood Special Event Permit Application and Facility Use Agreement for**

Bev's Poker Run - June 23, 2024

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**Instructions:**

To apply for a Special Event Permit, please read the Special Event Permit Application Instructions and then complete this application. Submit your application, including required attachments, no later than forty-five (45) days before your event. Facility Use Agreements should also be completed at this time (if applicable).

Adopted June 1, 2023

### EVENT INFORMATION

<input type="checkbox"/> Run	<input type="checkbox"/> Walk	<input type="checkbox"/> Bike Tour	<input type="checkbox"/> Bike Race	<input type="checkbox"/> Parade	<input type="checkbox"/> Concert
<input type="checkbox"/> Street Fair	<input type="checkbox"/> Triathlon	<input checked="" type="checkbox"/> Other			

Event Title: Bev;s Poker Run - June 23, 2024

Event Date(s): June 23, 2024 Total Anticipated Attendance: 50-100  
(month, day, year)

(# of Participants 50-100 # of Spectators \_\_\_\_\_)

Actual Event Hours: (from: 5 pm AM / PM (to): 10 pm AM / PM

Location / Staging Area: Saloon #10 - 657 Main St - Deadwood

Set up/assembly/construction \_\_\_\_\_ Start time: \_\_\_\_\_ AM / PM

Please describe the scope of your setup / assembly work (specific details): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dismantle Date: \_\_\_\_\_ Completion time: \_\_\_\_\_ AM / PM

List any street(s) requiring closure as a result of this event. Include **street name(s), day, date** and **time** of closing and time of re-opening: None

- Any request involving 25 or less motor vehicles will utilize Deadwood Street and will be barricaded at both ends of Deadwood Street.
- Any request involving 25-50 motor vehicles (not including motorcycles) - will park on the north side of Main Street, which will not require street closure.
- Any request involving 50 or more vehicles (which would require an entire street closure From Wall Street to Shine Street and security must be provided at Shine Street and Main Street and Wall Street and Main Street to direct traffic.
- Additional security maybe required at the discretion of the Event Committee.

### OPEN CONTAINER

<https://www.cityofdeadwood.com/planning/page/special-event-open-container-information-and-maps>

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Date: \_\_\_\_\_ Times: \_\_\_\_\_ Zone: \_\_\_\_\_

Adopted June 1, 2023

**APPLICANT AND SPONSORING ORGANIZATION INFORMATION**

Commercial (for profit)

Noncommercial (nonprofit)

Sponsoring Organization: Saloon #10

Chief Officer of Organization (NAME): Clay Sprague

Applicant (NAME): Clay Sprague Business Phone: (605 ) 591-9765

Address: \_\_\_\_\_  
(city) (state) (zip code)

Daytime phone: (605 ) 591-9765 Evening Phone: ( ) same Fax #: ( )

Please list any **professional event organizer** or **event service provider** hired by you that is authorized to work on your behalf to produce this event.

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(city) (state) (zip code)

Contact person "on site" day of event or facility use Clay Sprague Pager/Cell #: 605-591-9765

**(Note:** This person must be in attendance for the duration of the event and immediately available to city officials)

**REQUIRED:** Attach a written communication from the Chief Officer of the organization which authorizes the applicant or professional event organizer to apply for this Special Event Permit on their behalf.

**FEES / PROCEEDS / REPORTING**

NO YES

Is your organization a "Tax Exempt, nonprofit" organization? If **YES**, you must attach a copy of your IRS 501C Tax Exemption Letter to this Special Event Permit application (providing proof and certifying your current tax exempt, nonprofit status).

Are admission, entry, vendor or participant fees required? If **YES**, please explain the purpose and provide amount(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OVERALL EVENT DESCRIPTION:  
ROUTE MAP/ SITE DIAGRAM/ SANITATION**

Please provide a **detailed description** of your proposed event. Include details regarding any components of your event such as use of vehicles, animals, rides or any other pertinent information about the event:

Bev's Poker Run is the Annual Motorcycle event that is a fund raiser for Relay For Life

Requesting Motorcycle parking on June 23, 5 pm until 10 pm from Lee St. to Wall St  
as the last part of the event takes place in the Saloon #10 - 657 Main St

Bike Parking will be on East side of Main St. only.

**OVERALL EVENT / FACILITIES RENTAL DESCRIPTION (CONTINUED)**

- |                                     |                          |   |
|-------------------------------------|--------------------------|---|
| NO                                  | YES                      |   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the event involve the sale or use of alcoholic beverages? If <b>YES</b> , please provide your liquor liability insurance information to the last page of this application.   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Will Items or services be sold at the event? If <b>YES</b> , please describe: _____<br>_____<br>_____   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does this event involve a moving route of any kind along streets, sidewalks, or highways? If <b>YES</b> , attach a detailed map of your proposed route, indicating the direction of travel and provide written narrative to explain your route. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does this event involve a fixed venue site? If <b>YES</b> , attach a detailed site map showing all street impacted by the event.  |



In addition to the route map required above, please attach a diagram showing the overall lay-out and set-up locations for the following items:

- Alcoholic and Non-alcoholic Concession and / or Beer Garden Areas.

- Food Concession and / or Food Preparation Area(s).

Please describe how food will be served at the event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you intend to cook food in the event area, please specify the method to be used:

GAS       ELECTRIC       CHARCOAL       OTHER(SPECIFY): \_\_\_\_\_

- First Aid Facilities and Ambulance locations.

- Tables and Chairs.

- Fencing, Barriers and / or Barricades.

- Generator Locations and / or Source of Electricity.

- Canopies or Tent Locations.

- Booths, Exhibits, Displays or Enclosures.

- Scaffolding, Bleachers, Platforms, Stages, Grandstands or Related Structures.

- Vehicles and / or Trailers.

- Trash Containers and Dumpsters.

(NOTE): You must properly dispose of waste and garbage throughout the term of your event and immediately upon conclusion of the event, the area must be returned to a clean condition.

Number of trash cans: N/A      Trash Containers w / lids: \_\_\_\_\_

Describe your plan for clean-up and removal of waste and garbage during and after the event or use of facility: N/A  
\_\_\_\_\_  
\_\_\_\_\_

Other Related Event Components not covered above. N/A  
\_\_\_\_\_  
\_\_\_\_\_

**SAFETY / SECURITY / ACCESSIBILITY**

Please describe your procedures for both **Crowd Control** and **Internal Security**: N/A  
\_\_\_\_\_  
\_\_\_\_\_

Please describe your Accessibility Plan for access at your event by individuals with disabilities: N/A  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED: It is the applicant’s responsibility to comply with all City, County, State and Federal Disability Access Requirements applicable to this event.**

NO YES

Have you hired any Professional Security organization to handle security arrangements for this event? If **YES**, please list:

Security Organization: \_\_\_\_\_

Security Organization Address: \_\_\_\_\_  
(city) (state) (zip code)

Security Director (Name): \_\_\_\_\_ Business phone: \_\_\_\_\_

NO YES

Is this a night event? If **YES**, please state how the event and surrounding area will be illuminated to ensure the safety of the participants and spectators: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please indicate what arrangements you have made for providing **First Aid Staffing and Equipment**?

Number \_\_\_\_\_ Ambulance(s) – How provided? \_\_\_\_\_

Number \_\_\_\_\_ Emergency Medical Technicians – How provided? \_\_\_\_\_

APPLICANT specifically acknowledges and agrees that it shall be solely responsible for any damage to personal property located in or stored in or upon DEADWOOD’s property pursuant to the activity for which approval is being sought and that DEADWOOD shall not be responsible for any damage or loss to or of APPLICANT’s property which results from any cause or reason with regard to personal property owned by APPLICANT stored or located on DEADWOOD’s property pursuant to approval of the activity for which approval is being sought herein.

Acknowledge acceptance with initial: CS

APPLICANT agrees to hold DEADWOOD harmless and indemnify DEADWOOD from any sums of money which DEADWOOD might have to pay to any person as a result of property damage, personal injury or death resulting from APPLICANT’s use of the City property pursuant to approval of the activity for which approval is being sought herein.

Acknowledge acceptance with initial: CS

Adopted June 1, 2023

## PARKING PLAN / SHUTTLE PLAN / MITIGATION OF IMPACT

Please describe your plans to notify all residents, businesses and churches impacted by the event: \_\_\_\_\_  
**Residents and businesses will be notified through Public Hearing Notifications** \_\_\_\_\_

## ENTERTAINMENT / ATTRACTIONS / RELATED EVENT ACTIVITIES

NO YES  
  Are there any **musical entertainment** features related to your event or facilities rental? If **YES**, please state the number of bands and type of music.

Number of Stages: \_\_\_\_\_ Number of Bands: \_\_\_\_\_

Type of Music: \_\_\_\_\_

Will **sound amplification** be used?  
 If **YES**, please indicate: Start Time: \_\_\_\_\_ AM / PM – Finish Time: \_\_\_\_\_ AM / PM

Will **sound check** be conducted prior to the event?  
 If **YES**, please indicate: Start Time: \_\_\_\_\_ AM / PM – Finish Time: \_\_\_\_\_ AM / PM

Please describe the sound equipment that will be used for your event: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Will any fireworks, rockets or other pyrotechnics be used? If **YES**, please attach a copy of your permit (issued by the State Fire Marshall's office) to this application.

Are any signs, banners decorations or special lighting be used? If **YES**, please describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## PROMOTION / ADVERTISING / MARKETING / INTERNET INFORMATION

NO YES  
  Will this event be promoted, advertised or marketed in any manner? If **YES**, please describe:  
**Posters and social media** \_\_\_\_\_  
 \_\_\_\_\_

NO YES  
  Will there be any live media coverage during your event? If **YES**, please explain:  
 \_\_\_\_\_  
 \_\_\_\_\_

Refer all event public inquiries and / or media inquiries for this event to:

NAME: Clay Sprague PHONE: 605-591-9765

Adopted June 1, 2023

**INSURANCE REQUIREMENTS/LIQUOR LIABILITY**

**REQUIRED:** Insurance for your event will be required before final permit approval.

Name of Insurance Company: \_\_\_\_\_

Agent’s Name: \_\_\_\_\_

Business Phone: (\_\_\_\_)\_\_\_\_\_ Policy Number: \_\_\_\_\_ Policy Type: \_\_\_\_\_

Address: \_\_\_\_\_  
(city) (state) (zip code)

For final permit approval, you will need commercial general liability insurance that names “the City of Deadwood, its officers, employees and agents” as an additional insured. Insurance coverage must be maintained for the duration of the event. To determine the amount of insurance coverage necessary, please contact the Finance Office at (605) 578-2600 – Fax # (605) 578-2084.

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**AFFIDAVIT OF APPLICANT**

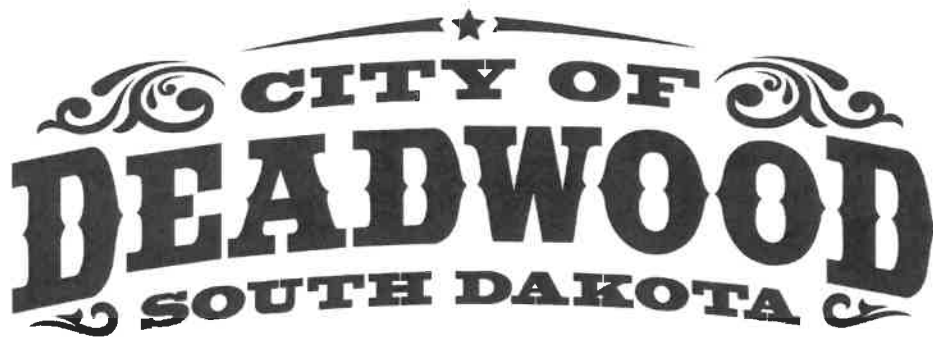
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Name of Applicant (PRINT): Clay Sprague Title: \_\_\_\_\_

\_\_\_\_\_ Date: 4/22/24

(Signature of Applicant/Sponsoring Organization)



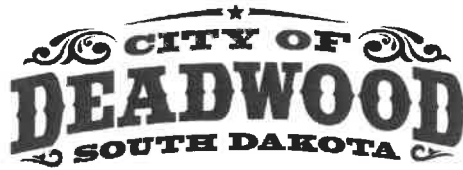
## Event Complex Rental and Use Agreement

Event: Snocross 2024

Date: 1/26-27

The City of Deadwood has contracted with the Deadwood Chamber of Commerce and Visitors Bureau for the management and coordination of the Deadwood Event Complex. As an applicant for rental and use of any portion of the Deadwood Event Complex, you are required to contact the Chamber for coordination and assistance in the submittal of this application to the City. The Chamber can be contacted at the following address:

Deadwood Chamber of Commerce  
501 Main Street  
Deadwood, SD 57732  
605-578-1876



Outdoor Event Complex  
Deadwood, SD 57732

### Deadwood Event Complex Rental and Use Agreement

Event Name: Deadwood Snocross Showdown

**Contact Information:**

Name of Applicant: Sarah Kryger

Business/Organization: The Deadwood Chamber of Commerce

Mailing Address: 501 Main Street

City, State Zip: Deadwood, SD 57732

Business Phone: 605-578-1876 Cell Phone: 605-863-1249

Email Address: sarah@deadwood.org

**Dates Event Complex requested:**

Set up Date(s): Jan 22nd Hour(s): 6am

Event Date(s): Jan 26-27 Hour(s): 8am-10pm

Clean-up Date(s): Jan 28 Hour(s): 8am-2pm

Approximate number of people who will attend: \_\_\_\_\_

I am applying to use the:  
*(Please check property requested)*

- Ticket Booth
- Main Grandstand Concession
- Crow's Nest
- Main Grandstand Restrooms
- VIP Grandstand
- Baseball Field(s)
- Baseball Field Restrooms
- Arena and Corral Areas
- Venue Seating
- Parking Lots
- Pyrotechnics
- Open Container

Office use Only
Key #
Key #
Key #
Key #
Key #
Key #
Key #

## Deadwood Event Complex Rental and Use Agreement

**Renter Type:**  For-Profit  Private  Non-Profit  Government

(Check One) *Categories above defined in the Complex Guidelines and Information Sheet*

**Rental Fees:**

	Event Complex Facilities	Parking Lots Only	Baseball Fields Only
<b>Private</b>	\$35 / Hr.	\$25 / Hr.	\$25 / Hr.
	\$300 / Day	\$200 / Day	\$100 / Day
<b>Non-Profit</b>	\$30 / Hr.	\$25 / Hr.	No charge
	\$250 / Day	\$150 / Day	No charge
<b>For Profit</b>	\$75 / Hr.	\$65 / Hr.	\$35 / Hr.
	\$500 / Day	\$500 / Day	\$300 / Day
<b>Government Agencies</b>	No charge	No charge	No charge

**Ticketed Events:**

Events planning on the sale of tickets for attendees may choose to apply a ticket surcharge or facility use fee to each ticket sold. The City of Deadwood has a ticket surcharge, which is set and amended by resolution. **The City Of Deadwood reserves the right to apply the rental fees regardless of the ticket surcharge.**

**Rental Fees subject to change. Fees and deposits waived for Lead Deadwood School Activities.**

**Damage Deposit (Refundable):** \$1250 minimum (no alcohol) or \$2,500 minimum (serving alcohol), which includes a \$250 non-refundable administrative fee.

**A cleaning/trash removal fee (Non-Refundable) of \$250.00 PER DAY applies.**

**A Streaming Fee of \$250 per Event applies IF USED.**

**Deposit must be received before application can be approved.**

**City reserves the right to bill for additional fees if damages exceed deposit amount.**

**Key Deposit (One Key or All Keys) (Refundable): \$100.00**

**Please read the Use Guidelines for cancellation and reservation policies.**

**Fees**

Event Complex Facilities	\$ _____
Baseball Fields	\$ _____
Parking Lots	\$ _____
Cleaning/Trash Removal	\$ <u>500</u>
Streaming	\$ <u>250</u>
<b>Total Fees</b>	\$ <u>750</u>

**Request to Waive**

**Complex Fees**

**Refundable Deposits**

Key Deposit	\$ <u>100</u>
Damage Deposit	\$ <u>2500</u>
<b>Total Deposits</b>	\$ <u>2600</u>

**Please write separate checks to the City of Deadwood (one check for event and one check for deposits)**

**Organization:** The Deadwood Chamber of Commerce

**Name:** Sarah Kryger

**Title:** Event Coordinator

**Signature:** 

**Date:** 9-19-23