

APPLICATION TO HOLD A SPECIAL EVENT ON HIGHWAYS

PART 1, Application	n (PLEASE PRINT):			
Name of Group / Or	ganization			
Name of Applicant				
Mailing Address				
City	Province		Postal Code	
Email			_	
Event Coordinator (Contact Information			
Contact Person		7	itle	
Phone #	Cell #		Email	
On-Site Contact Info	ormation			
Contact Person			itle	
Phone #	Cell #		Email	
Event Details				
Name of Event				
Dates for event				
Times for event	From	to		
Highway(s) Require	d _			
		(highway names, nos	<u> </u>	
between		and		
	(Landmark)		(Landmark)	
between		and		
	(Landmark)		(Landmark)	

PA	RT 2, Event Outline:			
1.	Highway(s) Required			
2.	Name of Event			
3.	Nature and Objectives of event			
4.	Is this a repeat event? If so, pleas	se provide the da	ate(s) and location(s) of previous e	event
5.	Date(s) for event			
6.	Start Time (Including setup)		End Time (Including take down	
7.	Projected number of people invol	ved in this event		
Pa	rticipants	Spectators	Volunteers	S
Но	w will these individuals be identifie	- ed?		
8.	Describe the capabilities and the	age range of par	ticipants	
9.	Provide details on how the event sheets and attached to this application if it		along the highway(s) (Information m	ay be provided on separate
10.	How the highway(s) may be affect risk that may occur to the event p			
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11.	Will any aid stations be set up near the highway and/or require access from the highway? Provide details on the set-up & procedures for participants to get on and off the highway(s) (Include map showing all locations of the aid stations)
12.	Any escort vehicles / patrol vehicles will be used? Provide details on how these vehicles work along the highway(s)?
13.	What assistance (mechanical & medical) will be provided to the participants when it is required? (Include map showing all locations of the aid stations)
14.	Is traffic control required? If so, a complete Traffic Accommodation Strategy (TAS) with signage diagram(s) is required. Strategy may be provided on separate sheets and attached to this application. http://www.transportation.alberta.ca/597.htm
15.	Who will be responsible for the implementation of the Traffic Accommodation Strategy?
16.	Provide or list all rules/regulations to be imposed by the event (Information may be provided on separate sheets and attached to this application if needed)
17.	Will there be animals and/or special equipment involved? If so, please provide details



PART 3, Checklist:

Personal Responsibility)

NOTES:

- **This Special Event Application** must be used to apply for all special events.
- ♣ Incomplete applications & special event applications received less than 30 working days / filming applications received less than 10 working days may not be considered.

PROVI	DE A COPY OF THE FOLLOWING:
	Certificate of Insurance with a minimum of \$2 million liability with a waiver against third-party claims. A maximum deductible shall not be greater than \$3,000.00. Name Province of Alberta as additional insured party.
	Provide a list and copy of the approval from other authorities who may have an interest in the event.
	Traffic Accommodation Strategy
	Map & Diagrams for – Route, Location, and Aid Station(s) of your event. (Must be actual maps no links)
	reby apply for permission to conduct a special event on a provincial highway(s) in accordance with the lars, plan, and traffic accommodation strategy submitted herewith.
	derstand that a submission of this form constitutes an application only and the event may not commence proval is issued.
	derstand that Alberta Transportation assumes no responsibility for whatever may occur during or as a f the event.
	zed Signature of Organization/Group (if not a Date (DD/MM/YYYY) ntity, Signature of individual(s) Assuming