



# FREDERICK

## PARKS & RECREATION

### **REQUEST FOR WAIVER OF FEES APPLICATION**

*All Requests must be submitted ninety (90) days prior to the event to be heard by the Recreation & Parks Commission. \*Attach Parks & Recreation Commission Application.*

*The Commission will make a recommendation to the Mayor and Board of Aldermen who have the final decision.*

#### **CONTACT INFORMATION:**

Name of Organization: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_

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

\_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_ Evening/Cell Phone: \_\_\_\_\_

Is this organization a non-profit:  Yes  No

Do you have a 501c3 number:  Yes  No If yes, provide number: \_\_\_\_\_

#### **EVENT INFORMATION:**

Name of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

List All Dates/Times and Facility/Amenities for which you are requesting a waiver of fees:

\_\_\_\_\_

\_\_\_\_\_

Expected attendance at the event: \_\_\_\_\_

Complete description of the event: \_\_\_\_\_

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**REQUEST OF WAIVER OF FEES APPLICATION**

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Describe your security plan: \_\_\_\_\_

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Please list a detailed projected budget of the event. Include expense/revenue reports from the previous three (3) years for this event. \_\_\_\_\_

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What is the surplus of funds / profits from this event used for: \_\_\_\_\_

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Describe the benefit of the event to the City of Frederick: \_\_\_\_\_

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Describe why this event should receive a waiver of fees and what makes it stand out from other events:

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How many years has this event been held: \_\_\_\_\_

List each location of the previous events: \_\_\_\_\_

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**REQUEST OF WAIVER OF FEES APPLICATION**

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Do any officers of the organization receive pay for the coordination of this event:  Yes  No

Please provide the following:

- \* List of all other members of your organizational team or Board of Directors by name, address, phone and email.
- \* Include three (3) signed letters of support (preferably on letterhead) for this event by community leaders. In these letters there must be mention of the waiver of fees and reasons why it is requested and supported.
- \* Complete and attach the Parks & Recreation Commission Application form.

You may attach additional sheets if necessary to offer complete information as requested.

*SUBMIT THIS APPLICATION ELECTRONICALLY TO:*  
[ssstamper@cityoffrederickmd.gov](mailto:ssstamper@cityoffrederickmd.gov)

Signature of Applicant: \_\_\_\_\_

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

Contact Info (if different from Page One): \_\_\_\_\_

\_\_\_\_\_

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*Received by City Parks & Recreation Department:* \_\_\_\_\_