



Kimberley Driscoll
MAYOR

CITY OF SALEM, MASSACHUSETTS
PARK, RECREATION & COMMUNITY SERVICES

5 Broad Street, Salem Ma 01970
Tel. (978) 744-0180/(978) 744-0924
Fax (978) 744-7225

Road Race/Walk/Parade Application

Applications must be submitted 90 days prior to event

We, the undersigned, respectfully apply for permission to host a Race/Walk/Parade in the City of Salem as follows:

Applicant's Name: _____

Organization Name: _____

Name of Race/Walk: _____

Contact #: _____ E-Mail Address _____

Address: _____

City/State/Zip: _____

Organization tax status (please include Tax ID number): _____

What charities will this Race/Walk/Parade benefit?

Approximately how much of the Race/Walk/Parade proceeds will be donated to each charity(s)

Day of Race/Walk/Parade Contact Information:

Name: _____ Contact #: _____

Date of Race/Walk: _____ Estimated Number of Runners/Walkers: _____

Time of Race/Walk: _____ Estimated Finish Time of Race/Walk: _____

Start Location: _____ Finish Location: _____

Has This Event Been Held Before? ____ Yes ____ No

All Races/Walks/Parade Are Required to Recycle.

(Will you bring to North Shore Recycled Fiber on 53 Jefferson Ave, open M-F, bring to your home to recycle curbside, or other?)

If you have questions about recycling, please contact Julie Rose for more information, 978-619-5679.



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Onsite EMT/Ambulance Services and Insurance is required _____ initial
Please Attach a Map of Route With the Following Items:

1. Race/Walk course
2. Direction of runners through the Race/Walk/Parade
3. Starting and finishing points
4. Certificate of insurance
5. Last year's race financials

A certificate of insurance for general liability naming the City of Salem as additional insured for amount not less than \$1,000,000 combined single limit for injury or death or property damages (including loss of use) in any one occurrence, and \$1,000,000 general aggregate coverage. (The City of Salem reserves the right to increase coverage minimum if event presents extraordinary risk.)

RELEASE & INDEMNITY AGREEMENT APPLICANT'S SIGNATURE *The undersigned Sponsor, by signature below, shall defend, indemnify, and hold the City of Salem, its officers, agents and employees, harmless against all liability, loss, or expenses, including attorney's fees, and against all claims, actions or judgments based upon or arising out of damage or injury (including death) to persons or property caused by any act or omission of an act sustained in any way in connections with the performance of this event or by conditions created thereby, or based upon violation of any statute, ordinance or regulation. This contractual indemnity provision does not abrogate common law or statutory liability and indemnification to the City of Salem, but is in addition to such common law or statutory provisions.*

Date: _____

Applicant's signature _____

Name of applicant

PLEASE SUBMIT PAYMENT OF \$200 WITH THIS PERMIT TO THE CITY OF SALEM PARK, & RECREATION DEPARTMENT **NO LATER THAN 30 DAYS PRIOR TO THE EVENT.** (\$150 for Non Profit- Proper Documentation Required).

Approved By:

Director (or designee) of Salem Park, Recreation & Community Services

Salem Police Department

City Use Only

Received _____ Payment Received _____ Added to Calendar _____