

North York Civic Centre 5100 Yonge St., 3<sup>rd</sup> Floor Toronto, ON M2N 5V7 Tel: 416-395-6011 Fax: 416-395-7886

# Mel Lastman Square Application for Special Events

Thank you for choosing Mel Lastman Square for your special event. Please complete this application with the site-map and return to the Special Events Office. If you require assistance or wish to arrange a site meeting to discuss your application, contact our office at 416-338-3343 or <u>MelLastmanSquare@toronto.ca</u>

\*Please note permits are subject to cancellation depending on provincial guidelines and regulations in accordance with COVID-19\*

**Commercial rental cost for 2023** – \$160.79 per hour (possible subject to change)

Before completing this Application, please read the attached Guidelines for the use of Mel Lastman Square. **NOTE: Completed Application must be received SIX (6) weeks prior to your event** 

Name of Even	nt					
Name of Orga	nization ——					
	-				n 🗆 Other (specify)	
Name of Cont	act Person —					
Address						
					ах	
Email						
2 <sup>nd</sup> Contact Pe	erson					
Addres <u>s</u>						
					ах	
Emai <u>l</u>						
Date(s) Required	1: D/M/Y					
Permit Fee is for	event time only					
Set up Time:	From:	AM	PM	То:	AM 🗌	PM
Event Time:	From:	🗆 AM	PM	То:	🗆 AM 🗌	РМ

<b>DA TORONTO</b>		Paul Quinlan Community Recreation Programmer
Parks, Forestry & Recreation Howie Dayton, Director, Community Recreation	North York Civic Centr 5100 Yonge St., 3 <sup>rd</sup> Flo Toronto, ON M2N 5V7	Fax: 416-395-7886
Tear Down Time: From: Additional Information	🗌 AM 🗌 PM	To: 🗌 AM 🗌 PM

### **Event Description**

What is the purpose of this event?\_\_\_\_\_

*Please provide DETAILED information about your event to be used in the promotion of your event. Please include website/email.* 

Telephone number to be given to public to call for event info \_\_\_\_\_\_

#### Estimated Attendance

### Event Schedule

Provide an event package with your final production details **two** weeks prior to your event which is to include:

- Map
- Event Schedule
- Performance Schedule
- Detailed Set up and take down schedule
- Any other details and/or documents requested by our offices

#### Equipment

Depending on availability, Mel Lastman Square will provide the items listed below for your event, free of charge. Please complete this section and indicate placement of items requested on the enclosed map.

Amphitheatre stage and the existi	ng sound system			
$\Box$ Barricades ~ for stage security	Number required:	(max. 14)	Purpose:	
Chairs	Number required:	(max. 200)		
Choir Risers (4' x 8')	Number required:	(max. 10)		
Music Stands				

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Plywood Sheets (4' x 8')         Podium (22.5" height x 14.5" with the second		(rental fee: \$15/piece)
Portable P.A. system with 1 mic	rophone	
Tables (2.5' x 6')	Number required:	(max. 20)
T-stands Sign Posts (22" x 28")	Number required:	(max. 8)
<b>Facilities</b> Will your organization require change r Will your organization require green roo Will your organization require access to	om facilities?	ers?  Yes No Yes No Yes No Yes No
First Aid and Lost and Found Statio Where will you First Aid/Lost and Found		
<b>Flags</b> Will your organization be raising a flag? If yes, please attach a picture of the fla		Services.
<b>Food Services</b> If food will be available at your event,	The City of Toronto Public Heal	th <u>must</u> give approval
Will food and/or beverages be sold at y	our event? 🗌 Yes 📋 No	
If yes, what charity or non-profit organ	nization will the proceeds go to	)?
- Attach any information pack	ets that you will be distribu	ting to your vendors
	flatables License or Operator's	
<b>Insurance</b> Do you have liability insurance to cover		
🗌 Yes 🛛 - If yes, provide an Insurar	nce Certificate from the insurar	nce company, and specify the amount
recommended sum is \$2,000,000.0	0)	
No - If no, you may purchase ins LTD.)	surance through The City of To	ronto (Allsport Insurance Marketing
<b>Merchandising</b> – List any items you o	r your representatives intend t	to sell at the event

Item	Service	Describe type of Merchandise



Paul Quinlan Community Recreation Programmer

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What charity or non-profit organization will the proceeds go to?\_\_\_\_

#### Signage

Mel Lastman Square has an electronic LED sign located at the top of the square, a few feet from Yonge Street with its support pole originating from the base the fountain. The sign is limited in the amount of information it can hold, so changes to the messages may apply. The sign can hold 20 letters, numbers, and punctuation marks/spaces per line. The sign can flash two lines of text at a time. Please keep message to a maximum of two lines, and note that only one character may fit into each box – this includes spaces, periods, and letters.

#### Electronic LED sign message template

#### **Sound Equipment**

Does your event require sound equipment?  $\Box$  Yes  $\Box$  No If yes, please call us at 416-338-3343 for information on our sound technician and our equipment.

#### Tents

Do you plan to erect your own tent(s), marquee(s) or canopy(ies) on the Square?	🗌 Yes 🗌	No
If yes, please specify the following:		

Purpose			
Dimensions			
Supplier		 	
Location of pro	posed structure		
NOTE: concret	e areas only		

#### **Vehicle Access**

Vehicles are not permitted on Mel Lastman Square unless dropping off equipment or supplies. A schedule of delivery **must** be approved by staff.

NOTE: No vehicles will be allowed to remain on the square during events, unless written approval is given through the Mel Lastman Square Special Events Office.



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Application to be completed and returned to:

Paul Quinlan, Community Recreation Programmer Parks, Forestry & Recreation North York Civic Centre 5100 Yonge Street, 3<sup>rd</sup> Floor Toronto, Ontario M2N 5V7 (Phone) 416-338-3343 (Fax) 416-395-7886 Paul.Quinlan@toronto.ca MelLastmanSquare@toronto.ca

I understand that as the permit holder for this event, I am responsible for any damaged, lost or misplaced City of Toronto property or equipment, and that I will be liable for the repair or replacement cost incurred.

After receiving your event application package and your event has been approved by the Mel Lastman Square Special Event office then a confirmation will be sent to the main contact of your organization (that is stated on page one).

Dated this:	day of	2	0
Applicant Name:		<u>.</u>	
Organization Name:			
Applicant Address:			
Telephone:			
Signature of Applicant			-
Application Approved by		Date	

Last update October 2016



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### **Indemnity and Release**

The City of Toronto and \_

(Organization name)

In consideration of granting of a permit for the use of Mel Lastman Square for

(Event Name)

On \_

(Date of Event)

I/We further hereby undertake to hold and save harmless and agree to indemnify all of the aforesaid from any and all liability incurred by an or all of them arising as a result of, or in any way connected with my/our participation.

I/We further agree to assume full financial liability for any damage or loss to the permitted facilities, furniture and equipment when caused by negligent or abusive treatment.

Your permit will be required to be paid in full based on our estimation of cost 2 weeks prior to your event. There may be additional amendments to your permit post event.

By signing this form, I/We acknowledge having read, understood and agreed to the above Indemnity and Release.

Signature of Authorized Representative: \_\_\_\_\_

Date\_\_\_\_\_



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# **Declaration of Adoption of a Non-Discrimination Policy**

The City of Toronto's policy of non-discrimination covers the following grounds:

- a) Events on Mel Lastman Square should not exploit the bodies of men, women, boys or girls solely for the purpose of attracting attention, and specifically, beauty pageants will be prohibited.
- b) Events on Mel Lastman Square should not stereotype on any ground covered by the City's non-discrimination policy.
- c) Events or symbols appearing on Mel Lastman Square shall be consistent with the principle of respect for the dignity and worth of all persons.

I declare on behalf of myself or the organization which I represent, that the organization complies with the following grounds:

- Race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, marital status, family status or handicap as outlined in the Ontario Human Rights code with respect to the services which are provided to the public and further that the event to be held on Mel Lastman Square will be open to all those interested such that there is no discrimination in any way as to attendance at the event.
- 2. In the services that are being provided to the public or by the person or organization seeking to hold the event, the person or organization complies in all respects with the Ontario Human Rights Code.
- 3. Any event to be held on the square shall be open to all persons interested in attending the event.

Name of applicant (please print)

Signature

Organization

Event Name and Date

Today's Date



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# Save and Hold Harmless Clause

The applicant for use of Mel Lastman Square agrees that the City, its servants, agents, successors or assigns, shall not be held liable for any injury, loss or damage, however caused, which the City may incur resulting from or arising out of the granting of this permission for use of Mel Lastman Square.

The applicant further agrees that it will from the time to time, and at all time hereafter, truly save, keep harmless and fully indemnify the City, its servants, agents, successors and assigns from any and all actions, causes of action, claims and demands whatsoever which may be brought against or made upon the City, its servants, agents, successors or assigns and against all loss, liability, judgements, costs or expenses which the City, its servants, agents, successors or assigns may sustain, incur or be put to resulting from or arising out of any act or omission on the part of the applicant, its servants, agents, successors or assigns which was done, or purported to have been done, in the performance of the applicant's event/activity obligations hereunder.

Application	Date:		

Name of Applicant: \_\_\_\_\_

Signature of Applicant:

Organization:

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



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