

EVENT FORM

Fred Meijer Mid-West Michigan Rail Trail Network

- *Fred Meijer Clinton-Ionia-Shiawassee Trail*_____
- *Fred Meijer Grand River Valley Trail*_____
- *Fred Meijer Flat River Valley Trail*_____
- *Fred Meijer Heartland Trail*_____

Organization name: _____

Event Coordinator & Contact Info _____

Event Date/s & times: _____

Type of Event: _____

Detailed trail use plan: _____

Number of expected participants: _____

Restroom facility plan: _____

First Aid/medical plan: _____

Parking Plan: _____

Traffic Control Plan : _____

Private Property involved? Where/ who _____

Plan to notify the public of the event: _____

Insurance coverage – Must provide a copy of the insurance endorsement/ rider that names the appropriate Friends group and the Mid-West Michigan Trail Authority as “additional insured” covering the above described event to be held on the trail sections designated above.

Event Coordinator Signature _____

Friends Representative Signature _____ Date _____