

**CITY OF SOMERS POINT**

**APPLICATION FOR BIKE RACES, FOOT RACES OR OTHER EVENTS IN  
THE CITY OF SOMERS POINT  
(Pursuant to Ordinance No. 10 of 1997)**

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

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Officer or Contact Person:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

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

**Emergency Phone # to contact on day of event and individual in charge:**

\_\_\_\_\_

**Route of Event:**

\_\_\_\_\_

\_\_\_\_\_

**Are you requesting Police services for traffic, crowd control, etc.? \_\_\_\_\_ If yes,**

**Please explain:** \_\_\_\_\_

\_\_\_\_\_

**Items to be attached to application:**

- 1. Map of Route**
- 2. Hold Harmless Agreement**
- 3. Insurance Certificate (\$1.0 Million General Liability) City to be endorsed on the Certificate as an additional insured – to read “The City of Somers Point, including all elected and appointed officials, all employees and volunteers, all boards, commissions and/or authorities and their board members, employees and volunteers”**

**Date Application Received:** \_\_\_\_\_ **Date approved by Council:** \_\_\_\_\_

\_\_\_\_\_  
**Approved by Police Chief**

\_\_\_\_\_  
**Lucy R. Samuelson, RMC  
City Clerk**

\_\_\_\_\_  
**Lucy R. Samuelson  
Insurance Fund Commissioner**