



Application for Reno Fire Department Special Events Medical Plan Approval

All Fees must be paid at the time of application. This form must be received at least (30) calendar days prior to the event.

Name of Event: _____

Date(s) of Event: _____

Event Location: _____

Name of Host Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact person: _____

Work phone: _____ Cell phone: _____ FAX: _____

Email address: _____

Type of Event (check all that apply):

- | | |
|---------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Concert | <input type="checkbox"/> Equestrian |
| <input type="checkbox"/> Festival | <input type="checkbox"/> Rodeo |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Event involving water |
| <input type="checkbox"/> Fair | <input type="checkbox"/> Sporting |
| <input type="checkbox"/> Motor Vehicle Race | <input type="checkbox"/> Combat sporting |
| <input type="checkbox"/> Extreme Sporting | <input type="checkbox"/> Political rally |
| <input type="checkbox"/> Other: _____ | |

Event Description:

Event to be held:

- Indoors Outdoors Both

Venue surface material:

- | | |
|---------------------------------|---------------------------------------------|
| <input type="checkbox"/> Grass | <input type="checkbox"/> Asphalt/concrete |
| <input type="checkbox"/> Gravel | <input type="checkbox"/> Temporary flooring |
| <input type="checkbox"/> Dirt | <input type="checkbox"/> Other: _____ |

Projected weather conditions: (You may reference the following sites to assist with weather projections for your scheduled date(s): <http://www.usclimatedata.com/climate/reno/nevada/united-states/usnv0076> and <http://www.srh.noaa.gov/srh/jetstream/global/hi.htm>)

Temperature:

- | | |
|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> <50° F | <input type="checkbox"/> 50°-60° F |
| <input type="checkbox"/> 61°-70° F | <input type="checkbox"/> 71°-80° F |
| <input type="checkbox"/> 81°-90° F | <input type="checkbox"/> 91°-100° F |
| <input type="checkbox"/> 101°-110° F | <input type="checkbox"/> > 110° F |

Humidity _____%

Wind _____MPH

Estimated shaded area: _____ sq. ft.

Estimated daily peak attendance: _____

Estimated total attendance: _____

Average age of attendees:

- | | | |
|------------------------------------|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> <25 years | <input type="checkbox"/> 26-49 years | <input type="checkbox"/> > 50 years |
|------------------------------------|--------------------------------------|-------------------------------------|

Could majority of attendees have acute or chronic illnesses that require special accommodations?

(Example: an event specifically intended for the acute or chronically ill)

- | | | |
|-----------------------------|----------------------------------|----------------------------------------------|
| <input type="checkbox"/> No | <input type="checkbox"/> Unknown | <input type="checkbox"/> Yes, describe below |
|-----------------------------|----------------------------------|----------------------------------------------|

Will alcohol be allowed, sold or expected to be on the premises?

- | | |
|-----------------------------|----------------------------------------------|
| <input type="checkbox"/> No | <input type="checkbox"/> Yes, describe below |
|-----------------------------|----------------------------------------------|

Emergency medical services (EMS) to be provided by: (if required)

- | | | |
|-----------------------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> Reno Fire Department | <input type="checkbox"/> REMSA | <input type="checkbox"/> Other |
|-----------------------------------------------|--------------------------------|--------------------------------|

Minimum EMS requirements are outlined in the attached flowchart “Minimum EMS Requirements for Special Events” (Pursuant to NRS 450B.650-700). The Reno Fire Department will review the application and have final determination on the EMS required for the event.

Attach a map of the event including routes of ingress and egress.

