



City of Helotes  
 Development Services  
 Department  
 P.O. Box 507  
 12951 Bandera Road  
 Helotes, TX 78023  
 Phone (210) 695.8877  
 Fax (210) 695.2123

# City of Helotes

## Application for Special Event / Parade License

CHAPTER 86,  
*Parades and Public Gatherings*

PERMIT NO.: \_\_\_\_\_

**Please read the following prior to completing this form:** city staff may contact you to determine if traffic control or any other code requirements are necessary for approval of the special event / parade permit application. After review of the application, city staff will contact you to inform you of the disposition of the application. Permit applications must be filed a minimum of **fifteen (15) days** before the special event / parade.

**Marathons & run / walks:** event organizers shall ensure and certify, by executing this permit application, that trash and other debris left by event participants along event routes shall be collected and disposed of by event organizers. All event routes, in their entirety, shall be designated with traffic cones to delineate such routes and secure pedestrians from vehicular traffic. Restroom, water station, and first-aid facilities shall be provided along all event routes. Do not paint on streets or other public rights-of-way.

**Submit completed applications to the Helotes Police Department:**  
 12951 Bandera Road or call 210.695.3087 for more information.

### Section I. Event Information

Check One:     Parade     Special Event    Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_    End Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Event Name and Description: \_\_\_\_\_

\_\_\_\_\_

Location and/or Route of Event:

\_\_\_\_\_

Event Assembly Time, if applicable: \_\_\_\_\_ Assembly Location: \_\_\_\_\_

Event Disband Time, if applicable: \_\_\_\_\_ Disband Location: \_\_\_\_\_

Number of Participants: People: \_\_\_\_\_ / Animals: \_\_\_\_\_ Animal Type: \_\_\_\_\_

Number and Type of Vehicles: Vehicles: \_\_\_\_\_ Vehicle Type: \_\_\_\_\_

Will the Event Occupy All or Part of the Road:  No     Yes

Street Closure(s) Required?     No     Yes

If Yes, Specify Street Closure Location: \_\_\_\_\_

\_\_\_\_\_

**Section II. Organization/Personal Information**

Sponsoring Organization: \_\_\_\_\_

Non-Profit Organization: \_\_\_\_ No \_\_\_\_ Yes \*(Please provide proof of non-profit status with application.)

Event Chairperson: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Section III. Application Checklist**

Please provide the following documentation with application:

- \_\_\_\_\_ Medical Plan
- \_\_\_\_\_ Evacuation Plan
- \_\_\_\_\_ Security Plan
- \_\_\_\_\_ ALS Ambulance Contract (For extreme sporting events only)

**Section IV. Other**

Please provide any additional information that may be helpful when considering this permit application:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section V. Execution**

**The applicant is responsible for the regulation and removal of all debris, trash, et cetera arising from the special event / parade. Refer to the current fee schedule for applicable permit fees. The event chairperson must place an approved permit in a conspicuous location within the event location. If the applicant is applying on behalf of another entity, the applicant must submit written permission from the other entity to do so.**

**My signature below indicates that I have the authority to execute this application on behalf of myself and / or the organization identified on this application, and both the organization and myself agree to fully comply with any and all provisions of this application, the permit and its requirements, and the City of Helotes Code of Ordinances.**

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

Relationship to Organization: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Appendix A: Medical and Evacuation Plans**

What physical address will be given in the event of an emergency? \_\_\_\_\_

Emergency operations will be coordinated by:

Name: \_\_\_\_\_

Telephone No.: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (Telephone number must be in service during event)

Name: \_\_\_\_\_

Telephone No.: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (Telephone number must be in service during event)

For extreme sporting events, please list the following:

Contracted Ambulance Company: \_\_\_\_\_

Contact person (day of event): \_\_\_\_\_

Contact person telephone no.: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Emergency telephone numbers: City of Helotes Ambulance: 911 City of Helotes Paramedics: 911

Fire Dept.: (210) 695-3572 (non-emergency) 911 (emergency)  
12951 Bandera Rd, Bldg. 3, Helotes, TX 78023

Police Dept.: (210) 695-3087 (administration) (210) 695-2500 (non-emergency)  
911 (emergency)  
12951 Bandera Rd, Bldg. 2, Helotes, TX 78023

**Medical Plan**

Event employees / volunteers shall immediately report all serious medical emergencies to the Emergency Coordinator(s) referenced above. Basic first aid shall be handled by the event Emergency Coordinator(s). Serious medical emergencies shall be reported to the City of Helotes EMS / Fire Department. Please provide any additional medical plan information (attach additional sheets if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Note: Medical emergencies involving participants of extreme sporting events shall be handled by contract ambulance(s) / medical team(s).**

Evacuation Plan

Attach a site plan of the event. Indicate on the site plan all exit locations for pedestrians and vehicular traffic. Please detail evacuation plan procedures for event attendees and employees / volunteers (attach additional sheets if necessary):

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Fire / Rescue Emergencies

Fire / Rescue emergencies shall be reported to the Helotes Fire Department.

Fire Dept.: (210) 695-3572 (non-emergency) 911 (emergency)  
12951 Bandera Rd, Bldg. 3, Helotes, TX 78023

**Appendix B: Security Plan**

Police officers provided by the City of Helotes Police Department: Yes \_\_\_\_\_ No \_\_\_\_\_

Events requesting City Police Officers shall contact:

Lieutenant Anthony Burgess  
Helotes Police Department  
(210) 695-5920

Police officers provided by the City of Helotes Police Department will provide security and protection for event personnel, participants, patrons, and vendors. Such officers will maintain order and perform crowd control on event property. Such officers will be assigned duty posts, as directed and determined by the supervising officer. Such officers shall not handle event money, work as parking attendants, or complete any other duties that would deter them from performing their primary mission of event security and crowd control. Officers shall be paid by the event prior to the end of the event.

Police officers provided by the event: Yes \_\_\_\_\_ No \_\_\_\_\_

Contracted Security Company: \_\_\_\_\_

Contact person (day of event): \_\_\_\_\_

Contact person telephone no.: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Number of police officers provided for the event: \_\_\_\_\_

Please provide any additional security plan information (attach additional sheets if necessary):

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