|  |  |  |
| --- | --- | --- |
| **Event Notification Document**  **(Event Organiser to complete)** | | |
| Event Name: | Event Organiser: | Event Date: |
| Event Location/Address: | Organiser Contact details:  Tel:  Mobile:  Email: | Start Time:  Finish Time: |
| **Expected attendance and crowd management**  (Delete as appropriate) | Expected / Estimated attendance:  Expected / Estimated number of vehicles:  **Y / N** Private / Ticketed event  **Y / N** Public / Open even  **Y / N** Mixed crowd / Families  **Y / N** Mainly children or elderly  **Y / N** Mainly adults | |
| **Does your event take place on a road?**  (Delete as appropriate) | **Y / N** The event is on or next to a public highway  **Y / N** We are applying for road closures  **Y / N** Large / high / long vehicles involved in event | |
| **Will alcohol be available at your event?**  (Delete as appropriate) | **Y / N**  Bar available  **Y / N**  Attendees bringing own alcohol | |
| **First Aid / Medical provision** | Please provide available details at this stage: | |
| **Event details –short summary**  Eg sporting activities, stunts, fireworks, whether trained marshalls/stewards are being used, insurance, radios available for communications etc.  Please attach event management plan if already available. | Please provide available details at this stage: | |

**Please return by email to:** SAG@newark-sherwooddc.gov.uk