Shelter Reservation Special Permit Agreement

Location: _____Mulberry Fields Park_____

Date of Activity: ___08/16/2025_____

This Special Permit Agreement authorizes ____Zionsville Pride____ ("Event Sponsor") to host a Zionsville Pride Festival special event with food and entertainment vendors _(the "Event") in ___Mulberry Fields Parks_____, which area is more specifically to be coordinated with the Superintendent of Parks and Recreation, if the following guidelines are followed:

- Zionsville Pride shall furnish a certificate of insurance from a responsible, Indiana-licensed insurance company evidencing comprehensive general liability insurance policy coverage with a limit of not less than $1,000,000 , with broad form contractual liability and participant legal liability, and that names the Zionsville Board of Parks and Recreation and the Town of Zionsville, Indiana Parks and Recreation Department as additional insureds.

- Food vendors must carry all applicable licenses, certifications, permissions, and insurances and operate to all health code standards as a concession provider for the Zionsville Pride Festival event.

- Entertainment vendors must carry all applicable licenses, certifications, and insurances to operate a public entertainment service at the Zionsville Pride Festival event. Each vendor must be approved by the Superintendent of Parks and Recreation prior to the event.

- Event Sponsor will obtain all applicable licenses, certifications, permissions, and insurances for an entertainment stage, and provide physical barricades/barriers and signage while stage is not in use and remains on park property.

- The Event Sponsor will be held accountable for any damage to park property as a result of the vendor's operations.

___Julia L Haines_____, on behalf of Event Sponsor, affirms that the undersigned is fully authorized to execute this Special Permit Agreement on behalf of Event Sponsor. The undersigned hereby acknowledges that he/she has read the foregoing information, and that he/she, on behalf of Event Sponsor, voluntarily applies to participate and use _Mulberry Fields Park_____ for the above Event. Event Sponsor agrees unconditionally, absolutely and irrevocably to defend, protect, indemnify and hold harmless the Town of Zionsville, Indiana, the Zionsville Parks & Recreation Department, the Zionsville Park & Recreation Board and their elected or appointed officials, officers, agents, servants and employees, from any claim, demand, suit, loss, cost or expense or any damage whatsoever which may be asserted, claimed or recovered, against the Town of Zionsville, the Zionsville Parks & Recreation Department or the Zionsville Park & Recreation Board, or their elected or appointed officials, officers, agents, servants and employees, by reason of any damage to property or personal injury, including death, sustained or claimed by any person or entity and which damage, injury or death arises out of or is in any way connected with the Event, and regardless of whether the damage, injury, or death is caused in whole or in part by the Event Sponsor, or by its officers, agents, servants, employees, vendors, subcontractors or volunteers or by event participants or attendees Event Sponsor further agrees to abide by all the rules and regulations pertaining to such activity established by the Town of

Zionsville Department of Parks and Recreation, its agents, or employees. Event Sponsor understands that there is no on-site supervision of the Event by the Zionsville Parks and Recreation Department at any time. Event Sponsor further understands that neither the Zionsville Parks and Recreation Department nor the Town of Zionsville assumes any liabilities for loss, damage or any kind of injury sustained by any human while engaging in the activities of the Event. ___Julia L Haines_____, on behalf of Event Sponsor, has carefully read this Special Permit Agreement, including the waivers and releases of liability contained therein, and understands and fully agrees with its contents. The undersigned attests that he/she is at least eighteen (18) years of age, that he/she has read and understands the foregoing Special Permit Agreement, agrees with it, and intends to be legally bound by its terms.

Event Sponsor: _Zionsville Pride Inc._____

By: __Julia L Haines_____ Date: Aug. 7, 2025_____

Printed: _____

Title: ___Board member_____

Town of Zionsville Board of Parks and Recreation

By: _____ Date: _____ Printed: Ryan Cambridge

Title: Park Board President

Zionsville Pride Festival Organizational Plan

I. Location and Venue:

- Festival site: Mulberry Park
- Date and Time: Saturday, August 16, 2025
  - Start time: 1:00 pm
  - End time: 7:00 pm
- Security provided by Zionsville Police Department
- Parking:
  - Available at the park
  - Overflow at Methodist Church
  - Vendor and volunteer parking at ZMS

II. Entertainment and Activity Areas

- Main Stage (located on grass near pickleball court – see map)

  1:00 p.m. - Welcome – Senator J.D. Ford and local photographer Tom Casalini

  1:30 to 2:15 p.m. - Anneliese and Ali (singing duo)

  2:30 to 3:15 p.m. - Dance Fit interactive class/performance

  3:30 to 4:15 p.m. - Moxie, local band

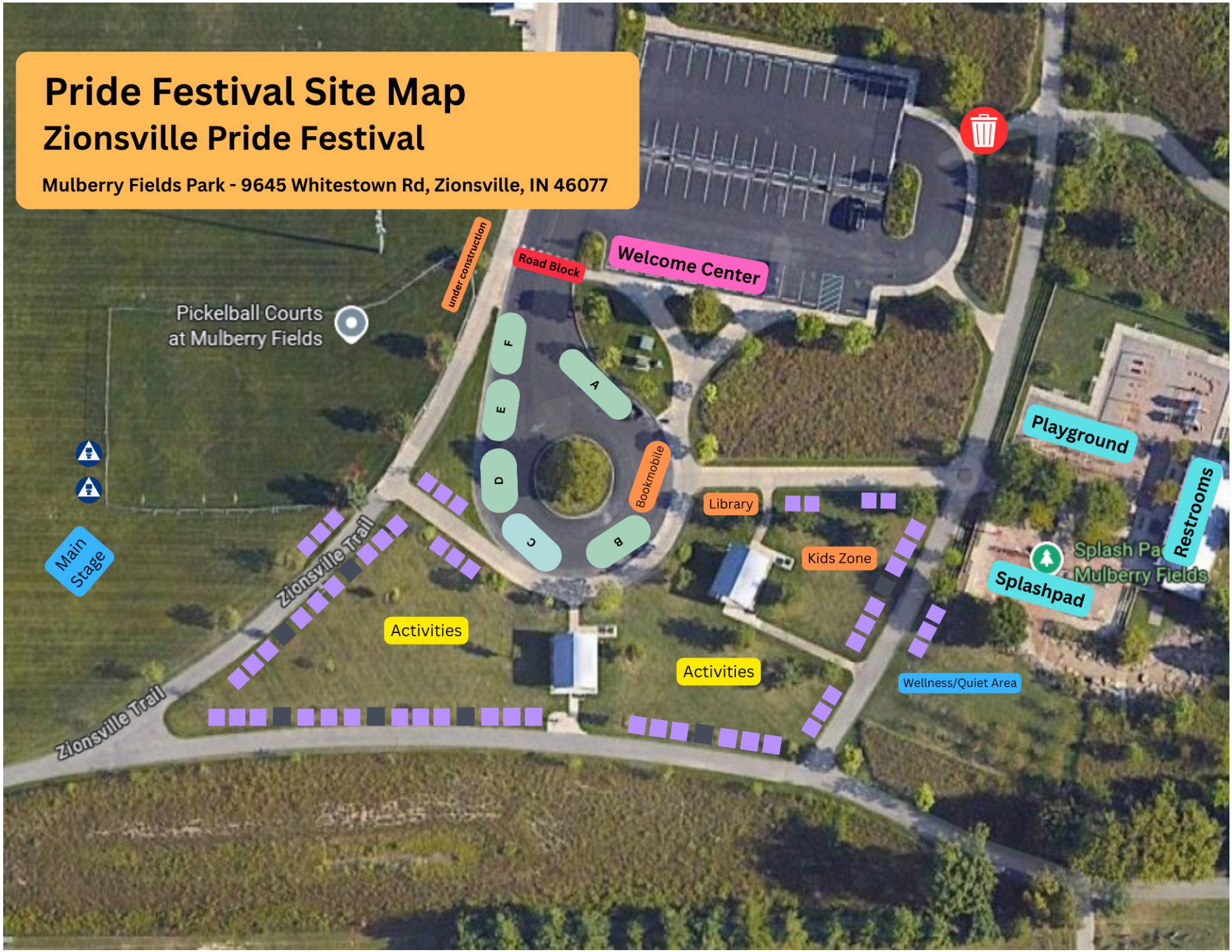
  4:30 to 5:15 p.m. – Boost, local band

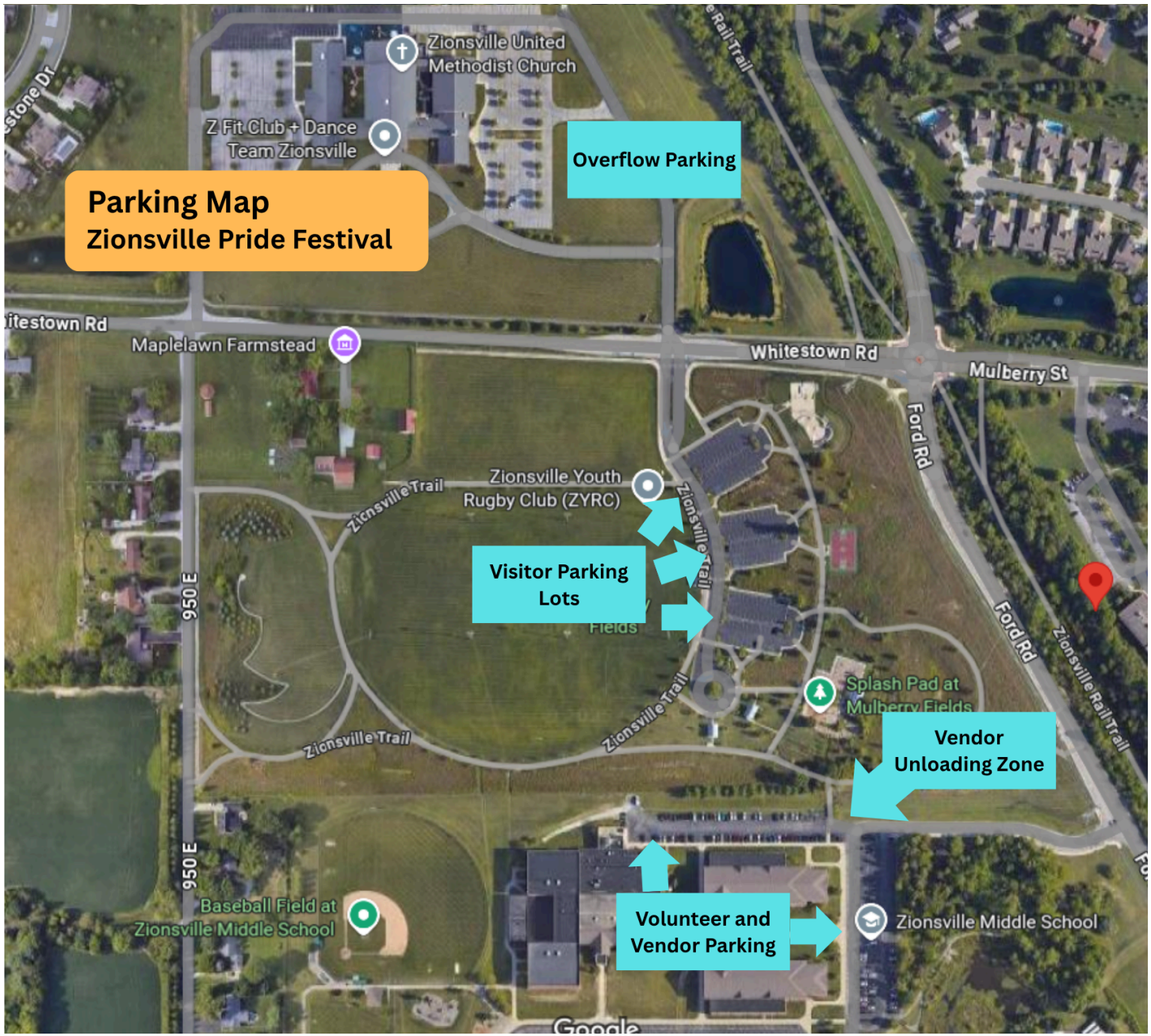
  5:30 to 7:00: Drag Performances with several artists

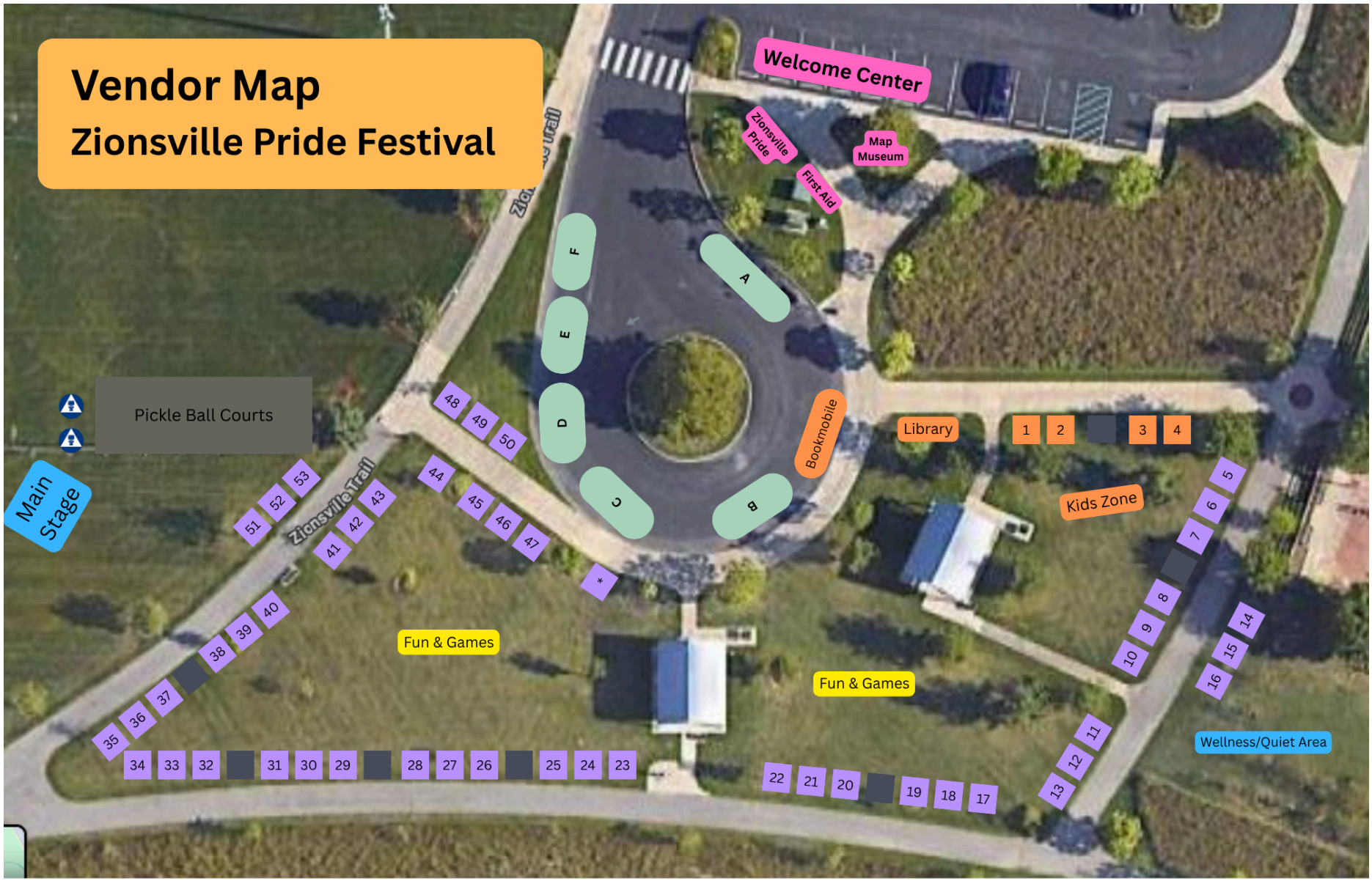
- Welcome Area: (located front and center of parking lot – see map)
  - Selfie station
  - Community Banner
  - Bookmobile parked here
- Kids' Zone Activity Areas: (located at the shelter – see map)
  - Ongoing: DIY crafts, Face painting and costume dress up
  - Library Staff Story Time - 2:30 p.m. to 3:00 p.m.
  - Drag Story Time – 4:30 p.m. to 5:00 p.m.

- Quiet/Wellness Zone: (located near the trees and playground – see map)
    - Yoga class – 2:00 to 2:30 p.m.
    - Meditation class - 4:00 p.m. to 4:30 p.m.
- Outdoor Games Area (located on grass between shelters – see map)
    - Large Connect 4
    - Cornhole
    - Hula hoops
    - Other outdoor games

III. Vendors and Non-profit Community groups – (See map)


Pride Festival Site Map
Zionsville Pride Festival
Mulberry Fields Park - 9645 Whitestown Rd, Zionsville, IN 46077
under construction
Road Block
Welcome Center
Pickelball Courts at Mulberry Fields
F
E
D
C
B
A
Bookmobile
Library
Kids Zone
Playground
Restrooms
Splash Pad Mulberry Fields
Splashpad
Main Stage
Zionsville Trail
Zionsville Trail
Activities
Activities
Wellness/Quiet Area


Parking Map
Zionsville Pride Festival
Zionsville United Methodist Church
Z Fit Club + Dance Team Zionsville
Overflow Parking
Maplelawn Farmstead
Whitestown Rd
Mulberry St
Ford Rd
Zionsville Youth Rugby Club (ZYRC)
Zionsville Trail
Visitor Parking Lots
950 E
Splash Pad at Mulberry Fields
Vendor Unloading Zone
Zionsville Rail Trail
Baseball Field at Zionsville Middle School
Volunteer and Vendor Parking
Zionsville Middle School
Google


Vendor Map
Zionsville Pride Festival
Welcome Center
Zionsville Pride
First Aid
Map Museum
Zionsville Trail
F
E
D
C
B
A
Bookmobile
Library
1
2
3
4
Kids Zone
5
6
7
8
9
10
11
12
13
14
15
16
Pickle Ball Courts
Main Stage
Zionsville Trail
48
49
50
44
45
46
47
51
52
53
43
42
41
40
39
38
37
36
35
34
33
32
31
30
29
28
27
26
25
24
23
*
Fun & Games
Fun & Games
22
21
20
19
18
17
Wellness/Quiet Area

1. PFLAG Zionsville
2. Ellie Mental Health
3. Heartland UU Church
4. Sweets! Party Rentals and Supplies
5. Public Safety - Fire Safety
6. Queer Chocolatier
7. Ribe Project, Inc. (The Ribe Project)
8. Zionsville Christian Church/St. Peter's UCC
9. St. Francis In-The-Fields Episcopal Church
10. The Remnant House
11. TVG-Medulla, LLC/ Chiro One
12. Zionsville Alliance for Mental Wellness
13. NextStep Psychology
14. Abby's Garden Parties
15. Village Yarn Company
16. Invoke Yoga Studio
17. Aprons From the Heartland
18. TaylorMade
19. Spectrum Stitches & Sundry
20. Mite-E-Ducts
21. Control Tech
22. Sutton's Optimal Solutions
23. Equality Indiana
24. Planned Parenthood Alliance Advocates
25. Good Trouble Coalition of Indiana
26. Adore Boutique
27. The Glass Garden
28. Fluffy Pizza Studio
29. LiminaLost
30. Mattox Made
31. Arrowwood Studio
32. MouPew Lifestyle
33. Yvette Michelle Jewelry Co
34. Vicious Fruit Apparel
35. Curious Squirrel Bookshop
36. Dance Fit Squad LLC
37. Always Give a Damn
38. Melanin Flame Candle Company
39. Novel Knot Designs
40. Clever Girl Design
41. Wall Street Treats
42. Zionsville Custom Creations
43. Ageless Aesthetics
44. Atlas Senior Advocacy
45. Lopez Law Office
46. Fetch Dog Resort
47. Augusta Animal Clinic
48. Gender Nexus
49. Damien Center
50. Trinity Haven
51. Free Mom Hugs
52. Flags For Good
53. Pride of Indy Bands

A. Aunt Mary Mobile Bar
B. Indie Taco
C. The Savory StageCoach
D. Gordo’s food truck
E. RV Foods LLC (Fillers)
F. Grumpy Gringo Llc

* Presenting Sponsor: The Lovely Dev

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 08/12/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	**CONTACT NAME:** Shelly Wynn
State Farm Shelly Wynn 8701 Southeastern Avenue Indianapolis IN 462391338	**PHONE (A/C, No, Ext):** 317-862-8900 **FAX (A/C, No):** **E-MAIL ADDRESS:** shelly.wynn.k2rc@statefarm.com
INSURED ZIONSVILLE PRIDE INC. 5281 CROWLEY PKWY WHITESTOWN IN 460754473	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** State Farm Fire and Casualty Company / 25143 **INSURER B :** **INSURER C :** **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADD INSD	SUB WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [X] LOC [ ] OTHER:	N	N	94-E7-Z393-0	07/10/2025	07/10/2026	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 300,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [ ] HIRED AUTOS ONLY [ ] NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	$
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
	[ ] UMBRELLA LIAB [ ] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N [ ] **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					[ ] PER STATUTE [ ] OTH-ER	$
							E.L. EACH ACCIDENT	$
							E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Not for profit organization

CERTIFICATE HOLDER

Zionsville Board of Parks and Recreation
1100 W Oak St
Zionsville IN 46077

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Shelly Wynn

This form was system-generated on 08/12/2025 .

© 1988-2015 ACORD CORPORATION. All rights reserved.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 08/08/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	**CONTACT NAME:** Shelly Wynn
State Farm Shelly Wynn 8701 Southeastern Avenue Indianapolis IN 462391338	**PHONE (A/C, No, Ext):** 317-862-8900 **FAX (A/C, No):** **E-MAIL ADDRESS:** shelly.wynn.k2rc@statefarm.com
INSURED ZIONSVILLE PRIDE INC. 5281 CROWLEY PKWY WHITESTOWN IN 460754473	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** State Farm Fire and Casualty Company / 25143 **INSURER B :** **INSURER C :** **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADD INSD	SUB WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [X] LOC [ ] OTHER:	N	N	94-E7-Z393-0	07/10/2025	07/10/2026	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 300,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [ ] HIRED AUTOS ONLY [ ] NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	$
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
	[ ] UMBRELLA LIAB [ ] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N [ ] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					[ ] PER STATUTE [ ] OTH-ER	$
							E.L. EACH ACCIDENT	$
							E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Non-profit organization hosting various events.

CERTIFICATE HOLDER

Zionsville Parks Department
1100 W Oak St
Zionsville IN 46077

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Shelly Wynn

This form was system-generated on 08/08/2025 .

© 1988-2015 ACORD CORPORATION. All rights reserved.