



SPECIAL-USE PERMIT INFORMATION

Individuals and/or groups may be required to secure a permit to conduct certain activities within the park district. A prospective park user shall apply for a special-use permit on the attached application. **This form shall be submitted to the park district's administrative offices no later than four (4) weeks prior to the date of the use requested.** Uses requiring the closure of roadways, pavilions or shelters must be submitted no later than seven (7) months in advance of the intended use.

The executive director shall consider requests for special uses and either grant or deny a permit for the use. **The park district may require an applicant to provide a certificate of liability insurance.** The park district may also require the applicant to pay a fee for the permit depending upon the nature of the use and its impact on the park. The fee may include any cost to the park district resulting from the use. See fee schedule below.

The park district may grant a permit to a non-Summit County resident individual or group and charge a non-resident fee, which may be greater than the standard fee for Summit County residents.

The park district, in granting a permit, may establish restrictions on the use including, but not limited to, the size of the group, the nature of the activity, the location within a park, and the means and methods of conducting the use. The park district may require a user to provide appropriate security.

The following list of examples is typical of, but not limited to, the types of activities which would require a special permit:

1. Organized Sports Activities

- a. Baseball, Softball
- b. Football
- c. Rugby, LaCrosse
- d. Cross-country running
- e. Swimming, swimming instruction
- f. Boating (group/individual): canoes, kayaks, etc.
- g. Bicycle races/events
- h. Tennis
- i. Volleyball
- j. Soccer
- k. Access to state waterways

3. Commercial-Use Permits

- a. Photography/Video productions *
- b. Photography/Professional portraits *
- c. Caterers, Disc Jockeys, etc.
- d. Inflatables

2. Special-Use Permits – Groups

- a. Corporate Challenge
- b. Road/Trail closings for hike-a-thons, walking events, etc.
- c. Use of grounds for special events such as weddings, religious events, political events, etc.
- d. Clubs, organizations, etc.
- e. Training exercises (i.e., police, fire, military, React, etc.)

4. Special-Use Permits – Individuals

- a. Use of special or prohibited equipment
- b. Collection of plants, animals, insects, etc.
- c. Research projects
- d. Astronomy

SPECIAL-USE PERMIT FEES

(Do not send in any payments for fees until permit use has been approved.)

USE	FEES**
Use of an area by a resident group of fewer than 50 people	No Charge
Use of an area by a resident group of 50 or more people.	\$20/hour
Use of an area by a non-resident group of fewer than 50 people	\$20/hour
Use of an area by a non-resident group of 50 or more people	\$30/hour
Closure of Sand Run Parkway or other designated park road(s) or parking lots for use by a group of any number.	\$25/hour
Use for a group requiring the assignment of a Metro Parks ranger or other park district employee	\$25/hour
Photography and wedding ceremonies for a resident (not permitted at the Nature Realm)	\$25/hour
Photography and wedding ceremonies for a non-resident (not permitted at the Nature Realm)	\$50/hour
Commercial use.	\$20/hour

Summit Metro Parks

SPECIAL-USE PERMIT INFORMATION

975 Treaty Line Rd., Akron, OH, 44313-5837
phone 330-867-5511 • fax 330-867-4711 • email csr@summitmetroparks.org

Completed permits must be received four (4) weeks in advance.

If your application is approved, a copy will be sent to you. It must be retained with proper signatures and kept with you so that any Summit Metro Parks employee who inquires can verify you have received permission to use the park as described below.

METRO PARK _____ FACILITY _____

Day & Date of Event _____ Start Time _____ End Time _____ Estimated Attendance _____

Name/Type of Activity _____

Explanation _____

Name of Photographer

Name of Caterer

Name of Disc Jockey

YOUR INFORMATION (Person in charge and responsible)

NAME _____ PHONE (day/evening) _____

ADDRESS _____ EMAIL _____

CITY, COUNTY, STATE & ZIP _____

Organization's and/or Sponsor's Name (if different from above) _____

Address _____ City _____ County _____ State _____ Zip Code _____

INSURANCE INFORMATION – IF REQUIRED (See information page)

Insurance Company _____ Amount of liability coverage _____

I hereby make this application for special use and agree to abide by all rules and regulations in effect for Summit Metro Parks and its pavilions and shelters.

Signature of Applicant

Date

Metro Parks Use Only Below This Line

PERMIT APPLICATION: **APPROVED** **REJECTED** with reason, see below

Permit Fee: _____ INSURANCE REQUIRED: YES NO

Security required _____ Additional toilet facilities required _____

Additional assistance needed _____ Additional clean-up needed _____

Emergency medical service required (active use or groups of 50 or more) _____

Summit Metro Parks restrictions and/or requirements for use: _____

Signature of Park Manager

Date

Signature of Executive Director or Chief of Operations

Date