

Event Management COMMERCIAL OUTDOOR FITNESS ACTIVITY APPLICATION FORM

This application **MUST** be completed and submitted a minimum of **4 weeks prior** to the proposed event/activity

SECTION 1 – APPLICANT DETAILS					
Organisation Name					
Contact Person					
Postal Address					
Contact Number		ABN			
Email Address					

SECTION 2 – FITNESS LOCATIONS		
Loxton Town Oval	Waikerie Town Oval	
Loxton Riverfront (Apex Park area)	Waikerie Sporting Precinct	
Loxton Sideshow Alley	Waikerie Riverfront (Lions Club area)	
Other	Other	

SECTION 3 – PERMIT TYPE								
Annual Permit \$200 permit fee	6 month Permit \$120 permit fee		Casual Use Permit \$7 permit fee per session (Minimum of 12 sessions)					
Details of Proposed Use (Activ	Details of Proposed Use (Activity description eg PT, Boot Camp, Yoga)							
Number of Clients Expected	Number of Clients Expected							
Equipment to be Used in Activ	rity							
Do you require amplified musi	c?	Yes	No 🗌					

SECTION 4 – TRAINING SESSIONS								
Commencement Date Finish Date								
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Start Time								
Finish Time								

SECTION 5 – RECOGNISING SOCIAL INCLUSION AND ACCESSIBLE EVENTS								
Is your event disability and sensory friendly?	Yes No Please provide details							
Will the event have disability bathroom facilities, if not do you require Council's disability portable and accessible toilet?YesNo[]								
For more information on planning an accessible and inclusive event, please visit								
https://inclusive.sa.gov.au/resources/state-authority-resources/accessible-and-inclusive-community-								

events/planning-an-accessible-and-inclusive-event

SECTION 6 – CHECKLIST

The issuing of this permit is subject to the applicant submitting and answering all the questions in this application. The following checklist is to ensure you have provided all the necessary documentation. If you require further assistance with the application, please contact the Community Development Officer on 8584 8000.

Copy of your Public Liability Insurance Certificate of Currency for a minimum of \$20 million
Professional Indemnity Insurance to a minimum of \$5 million
Fitness licence to undertake the intended activities
Site Plan <i>(if applicable)</i>
APRA & PPCA Licence (If applicable)
Payment of any prescribed fees (if applicable)
Is your event disability and sensory friendly?

SECTION 7 – DECLARATION AND ACKNOWLEDGEMENT							
I acknowledge that I have read and understood the permits conditions and agree to abide by the general conditions and any special conditions that Council may determine.							
Name		Date					
Organisation and Position							
Signature							

LODGEMENT DETAILS				
District Council of Loxton Waikerie	For enquiries, please contact:			
PO Box 409	Sue Schultz			
35 Bookpurnong Terrace, Loxton SA 5333	Community Development Officer			
Email: council@lwdc.sa.gov.au	Phone: 08 8584 8000 / Email: <u>council@lwdc.sa.gov.au</u>			
Your application will be assessed and if elements of your information is incomplete a Council				
representative will be in contact with you.				

TERMS AND CONDITIONS

The objectives of the following guidelines outline minimal standards expected from permit holders when planning and undertaking outdoor fitness training activities in the District Council of Loxton Waikerie area and aim to:

- i) Promote an active and healthy community.
- ii) As far as is reasonable, provide permit holders with equity of access to the Council reserves while at the same time ensuring that the general community is not disadvantaged in terms of access.
- iii) Ensure orderly and proper conduct of activities on Council reserves so as to provide a safe and enjoyable experience for participants.
- iv) Ensure current stakeholders of Council open public spaces are not disadvantaged by increased use of open public spaces by fitness groups.
- v) Minimise liability risks by ensuring that permit holders are appropriately covered by public liability and professional indemnity insurance.
- vi) Reduce the impact of fitness activities on Council open public spaces in relation to the condition and maintenance of community assets.

1. The following groups are exempted from permit fees however should make enquiries with Council prior to any regular activity

- a) Local sporting clubs and
- b) Registered not-for-profit organisations.

2. Permitted activities

- a) Gym session (an organised group using Council exercise equipment).
- b) Gym session (with/without free weights, medicine balls or any other exercise equipment, jump/balance activities).
- c) Aerobic activities (sprints, obstacles, speed and agility course).
- d) Yoga, tai chi, Pilates and any mat activity.
- e) Circuit Training.
- f) Boxing with pads.
- g) A combination of any of the above.
- h) Any other associated activities approved by Council.

3. Activities requiring Special Permission Permit

- a) Aggressive and intimidating activities that involves shouting, loud voice calls or instructions.
- b) Activities involving amplified music or amplified audio equipment e.g. loud hailers, outside of approved times.
- c) Activities on playground equipment.

4. Eligibility

Fitness groups and personal applicants providing fitness services, activities and/or instruction to people on Council open space areas and receiving a commercial benefit must:

- a) Provide evidence of current Public Liability Insurance policy to a minimum of \$20 million; and
- b) Provide evidence of current Professional Indemnity Insurance to a minimum of \$5 million.

5. Permitted Areas of Use for Approved permit Holders:

a) Loxton Town Oval	b)	Waikerie Town Oval
c) Loxton Riverfront (Apex Park area)	d)	Waikerie Sporting Precinct
e) Loxton Sideshow Alley	f)	Waikerie Riverfront (Lions Club area)

6. Application

Permits will be valid for a 'Season' (6 months), 'Annual' (for a maximum of 12 months) or a 'Casual' (once off use) and will authorise each permit holder to use their allocated area for fitness activities in accordance with these Guidelines on a **non-exclusive basis**.

COUNC	IL USE ONLY SECT	TION 7 – ASSESSMENT	OF APP	LICATION	4		
Name of	Event			Permit Nu	umber		
Name of	Event Organiser						
Location	of Event						
Date of E	vent		CM Reco	ord No.			
Booked in	n Council Calendar		Works R	equests			
Documer	ntation Received and	d Reviewed				Yes	N/A
Public Lia	bility Insurance - Cer	rtificate of Currency Insura	nce for a	minimum c	of \$20m		
Professio	nal Indemnity Insura	nce to a minimum of \$5 mi	llion				
Fitness licence to undertake the intended activities							
Key requirements							
Power requirements							
Site Plan							
Traffic Management Plan/Map (if applicable)							
APRA or PPCA Licence (if applicable)							
ls your ev	vent disabilty and ser	nsory friendly?					
Will the event have disability bathroom facilities, if not do you require councils disability portable and accessible toilet?							
Additiona	al Notes/Requireme	nts					
Signed o	n behalf of the Distr	ict Council of Loxton Wail	kerie				
Signed				Date			
Name				Position			