

**Walk-a-thon Event Form**  
**City of Traverse City**  
**State Law**



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A walk-a-thon is defined as a group of pedestrians walking along a designated route in which participants raise money or awareness for a community benefit. Participants must adhere to state laws for pedestrians:

- 1) **Walk on sidewalks or TART Trail where provided.**
- 2) **If no sidewalks/trail, walk to the edge of the roadway.**
- 3) **Use the crosswalks.**

Do you need to use more of the roadway area? Yes\_\_\_ No\_\_\_. If yes, please contact the City Clerk's Office for a Parade Permit. 922-4480.

This form serves as a valuable communication tool between the organization and the City. Upon completion, we will forward to various City Departments. If there are any conflicting issues (such as other events, construction projects, etc.) which may affect your route, we will forward those issues to you.

Sponsor Organization:\_\_\_\_\_

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

Street City State Zip

Name (contact person):\_\_\_\_\_

Daytime Phone #:\_\_\_\_\_ Phone # during event:\_\_\_\_\_

Date of Event:\_\_\_\_\_ Time:\_\_\_\_\_

Sidewalk/Trail Route. Please complete Attachment A.

Street Edge Route. (If no sidewalk/trail exists) Please complete Attachment A.

Does your route include a State Highway? Yes\_\_\_ No\_\_\_. If yes, please contact the Michigan Department of Transportation for approval. (231) 941-1986.

Are any parks to be used? Yes\_\_\_ No\_\_\_. If yes, please contact the Parks Department to obtain a Park Usage Form. (231) 922-4910.

Are any signs or mile markers to be used? Yes\_\_\_ No\_\_\_. If yes, please contact the Zoning Administrator for sign regulations. (231) 922-4464.

**The undersigned acknowledges that the City may be required from time to time to release records in its possession. The undersigned hereby gives permission to the City to release any records or materials received by the City from the undersigned as it may be requested to do so as permitted by the Freedom of Information Act, MCL 15.231 et seq.**

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
(person indicated above)

Fee: \$-0-

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(Internal use only)

**To Departments indicated below:** If you are aware of any issues that may affect this event, please submit those comments in writing to the City Clerk's Office within 3 days, and we will forward them to the organization.

**- Completed by City Clerk's Office -**

<b>Required Approvals</b>	<b>No issues:</b>	<b>Date</b>	<b>Copy</b>
Police Department			
Fire Department			
Streets Department			
Engineering Department			
DDA/DTCA			
Parks and Recreation Department			
TART Trails			

**Attachment A**  
**- Completed by sponsoring organization -**

Sidewalk/Trail Route. Please describe route including the sidewalks and/or TART trail that will be used as part of the route including starting point, direction walking and ending point. Attach map if necessary or easier.

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Street Edge Route. If no sidewalk/trail exists, please describe route including the street edges that will be used as part of the route as it connects to the above sidewalk/trail route. Attach map if necessary or easier.

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