This “Special Event Service Agreement” consists of a total of 2 pages. It contains the agreement form, Event Sponsor responsibilities and cost formula.

The “Cost Formula” is in accordance with the City of Thunder Bay Bylaws.

The cost per hour is in accordance with the City of Thunder Bay’s bylaw for fees.

At this time the cost is $180.00 per hour.

The minimum total time for any event is 4 hours.

SPECIAL EVENT SERVICE AGREEMENT

Between: **Superior North Emergency Medical Services**
(a Division of the City of Thunder Bay)
(hereafter referred to as **"SUPERIOR NORTH EMS")**

And: _____
(hereafter referred to as the **"EVENT SPONSOR"**)

1. **"SUPERIOR NORTH EMS"** agrees to provide and operate an Ambulance Service at the following location for the safety and convenience of **all** persons in attendance at the Special Event.

   Special Event:_____

   Location: _____

   Date: _____

   Onsite Times **Start:**_____ **End:**_____

2. It is agreed by the **"EVENT SPONSOR"** that the operation of an Ambulance Service by **"SUPERIOR NORTH EMS"** at the Special Event will not impede and/or interfere with the obligation of **"SUPERIOR NORTH EMS"** to provide ambulance service in the event of an emergency call outside the Special Event site, providing the ambulance assigned to the Special Event is the closest available vehicle to the emergency, or when required due to an EMS or other declared emergency situation. If the ambulance assigned to the Special Event is called away from the Special Event site, the **"EVENT SPONSOR"** will only be responsible, financially, up until the time the ambulance is called away.

3. In the event that the ambulance assigned to the Special Event is required as mentioned above in #2, the **"EVENT SPONSOR"** can request another ambulance, **as medically required**, by contacting the Central Ambulance Communications Center at "911".

4. The **"EVENT SPONSOR"** is responsible for the following:

   - To notify **"SUPERIOR NORTH EMS"** a minimum of 24 hours in advance, in the event of cancellation of the Special Event. Failure to do so will result in a minimum 4-hour charge.

   - To notify the on site Ambulance Service of any request for emergency medical service on the event site. This may be done by personal contact with the assigned Paramedics, by providing the Paramedics with communication equipment compatible with that being used at the Special Event, or by providing the Paramedics with a cell phone.

   - To ensure clear ambulance vehicle access/egress.

   - To not in any way impede/obstruct the Paramedics in the performance of their duties.

   - To ensure crowd control for the Paramedics while performing their duties.

- To provide utilities if required.

5. The "**EVENT SPONSOR"** is financially responsible for any time over and above the total time that may result from any ambulance service call related to the Special Event.

6. The **"EVENT SPONSOR"** agrees to indemnify the City of Thunder Bay the operator of **"SUPERIOR NORTH EMS"** for any claims resulting from negligent act(s) and/or omission(s) by the Event Sponsor during the Special Event.

7. The **"EVENT SPONSOR"** agrees to pay the "**CITY OF THUNDER BAY"**, **in advance**, for all ambulance service costs associated with the Special Event, as calculated on the "Costs Formula" section.

8. **"SUPERIOR NORTH EMS"** may cancel, without penalty, this agreement for the provision of an Ambulance Service at the Special Event, due to the unexpected/unplanned unavailability of Paramedics and/or ambulance vehicles due to situations beyond our control.

9. The **"EVENT SPONSOR"** will provide one (1) contact person and a phone number for that person.

COST FORMULA

a) Hourly costs per City of Thunder Bay Bylaw (on site time + travel to event + travel from event [minimum 4 hours]

$180.00 x ____ hrs **TOTAL AMOUNT DUE** = _____$

THIS AMOUNT IS DUE PRIOR TO THE EVENT, AND ADJUSTMENTS OR REFUNDS WILL BE RESOLVED AFTER THE SPECIAL EVENT

We the **"EVENT SPONSOR"** hereby agree with the above stated terms and costs for the provision of an Ambulance Service at our Special Event.

Signed this_____day of_____by,

_____ _____ for the **"EVENT SPONSOR"**
(Print) (Sign)

_____ _____ for **"SUPERIOR NORTH EMS"**
(Print) (Sign)

Submit

Email completed form to Angela Pizzi Angela.Pizzi@thunderbay.ca.