



City Council Agenda Item Report

FROM: Jamie Wolters

MEETING DATE: July 13, 2026

SUBJECT: Special Event-Mt. Baldhead Challenge

DESCRIPTION:

The Rotary Club of Saugatuck and Douglas are organizing the Mt. Baldhead Challenge to take place on September 12, 2026. See attached application with race route maps and breakdown of event below. City Staff, Fire, Police, and event organizers met for a safety meeting. Fire, DPW and Police have given approval to move forward.

BREAKDOWN OF EVENT:

Name: Mt.BaldheadChallenge
Date/Time: 9/12/26,8:45am-3:00pm
Location: Oval Beach start with Coghlin Park finish
Estimated Attendees: 650-700
Estimated Volunteers: 125
Fireworks: No
Alcohol: Yes
Music: Yes

BUDGET ACTION REQUIRED:

N/A

LEGAL REVIEW:

N/A

SAMPLE MOTION:

Motion to approve/deny the Mt. Baldhead Challenge to take place on September 12, 2026, organized by the Rotary Club of Saugatuck and Douglas.

RECEIVED

FEB 20 2026

CITY OF SAUGATUCK
102 BUTLER ST
SAUGATUCK, MI 49453



102 Butler Street • P.O. Box 86 • Saugatuck, MI 49453
Phone: 269-857-2603 • Website: www.saugatuckcity.com

Council Action

____ Approved

____ Denied

____ Date

SPECIAL EVENT & PARADE APPLICATION

Must be filled out in its entirety & returned to the City Clerk's Office 60 days prior to scheduled event

SPONSORING ORGANIZATION INFORMATION

LEGAL BUSINESS NAME: Rotary Club of Saugatuck-Douglas TELEPHONE: 248-245-4210
MAILING ADDRESS: P.O. Box 211 Douglas, MI 49406
CONTACT NAME: Helen Baldwin TELEPHONE: -
E-MAIL ADDRESS: hbaldwin0925@gmail.com CELL PHONE: 248-245-4210

CONTACT PERSON ON DAY OF EVENT

CONTACT NAME: Helen Baldwin TELEPHONE: -
E-MAIL ADDRESS: hbaldwin0925@gmail.com CELL PHONE: 248-245-4210

EVENT INFORMATION

NAME OF EVENT: MT Baldhead Challenge DATE(S) OF EVENT: Saturday Sept. 12, 2026
PURPOSE OF EVENT: Support for Boy's & Girls Club RAIN DATE: N/A

☒ Non-Profit ☐ For-Profit ☐ City Operated/Sponsored ☒ Co-Sponsored
☒ Marathon/Race ☐ Festival/Fair ☐ Video/Film Production ☐ Other _____

EVENT LOCATION: start Oval Beach finish Coghlin Park EVENT HOURS: 8:45am - 3pm

ESTIMATED NUMBER OF ATTENDEES: 650-700

ESTIMATED NUMBER OF VOLUNTEERS: 125

ESTIMATE DATE / TIME FOR SET-UP: Sept. 11, 2026 9 ☒ A.M. ☐ P.M.

ESTIMATE DATE / TIME FOR CLEAN-UP: Sept 12, 2026 3-5 ☐ A.M. ☒ P.M.

EVENT DETAILS

WILL MUSIC BE PROVIDED DURING THIS EVENT: ☒ Yes ☐ No

TYPE OF MUSIC PROPOSED: ☒ Live ☒ Amplification ☐ Recorded ☐ Loudspeakers

PROPOSED TIME MUSIC WILL BEGIN: 8am END: 3pm

FOOD VENDORS/CONCESSIONS: (Contact Allegan County Health Department) ☒ Yes ☐ No
☐ Provide Copy of Health Department Food Service License

WILL ALCOHOL BE SERVED AT THIS EVENT: ☒ Yes ☐ No
☐ Provide Copy of Liquor Liability Insurance (listing the City as additionally insured)
☐ Provide Copy of Michigan Liquor Control License

If yes, describe measures to be taken to prohibit the sale of alcohol to minors: Bar area fenced in,
ID checked at entrance, hands stamped.

WILL FIREWORKS BE APART OF EVENT: ☐ Yes ☒ No
☐ Provide Copy of Liability Insurance (listing the City as additionally insured)
☐ Provide Copy of Fireworks Permit

EVENT SIGNAGE: City Council approval is required for any temporary signing in the public right-of-way, across a street or on City property. Which of the following signs are requested for this event:

☐ "YARD" SIGNS - Number requested: ____ (Maximum size is 2' x 2'. Cannot be displayed no more than 15 days prior to first day of event and must be removed 24 hours after end of event.)

☒ BANNER UNDER SAUGATUCK PALETTE SIGN - (Size cannot be greater than 14' x 4'). Cannot be displayed more than 15 days prior to first day of event and must be removed 24 hours after end of event.)

☒ SIGNAGE AT EVENT SITE - Location(s): Cogolin Park
Description of signs: Triumphant Arch, Sponsor Signs, Course Maps
(Signs at event site cannot be displayed prior to day of the event and must be removed at the end of the event.)

TENTS/CANOPIES/MISC: The City of Saugatuck does not have tents, stage, tables or chairs available for rental. There are a number of businesses listed in the yellow pages under "Rental Service Stores" that specialize in the rental of event supplies. Will the following be constructed or located in the event area:

☐ BOOTHS - QUANTITY _____ ☒ TENTS - QUANTITY 6

☐ AWNINGS - QUANTITY _____ ☒ TABLES - QUANTITY 10

☒ PORTABLE TOILETS - QUANTITY 10

VENDOR PARKING: Have you made arrangement for vendor parking? ☐ Yes ☒ No

If yes, where do you propose your vendors park? n/a

Will the Interurban be utilized? ☒ Yes ☐ No Time(s) 8am - 1pm

pick up + drop off locations coordinated with shuttle service (including Interurban) directly

DEPARTMENT OF PUBLIC WORKS

☐ APPROVED

☐ DENIED

Authorized Personnel Signature

Will this event require the use of any of the following municipal equipment: ☐ Yes ☐ No

☒ TRASH RECEPTACLES – QUANTITY 10

☒ BARRICADES – QUANTITY TBD, pending

☒ TRAFFIC CONES – QUANTITY TBD - pending course review

☒ PARKING SIGNS – QUANTITY course review

☒ FENCING

☐ WATER

☒ ELECTRIC

☐ RESTROOM CLEANING

☐ OTHER _____

POLICE DEPARTMENT

☐ APPROVED

☐ DENIED

Authorized Personnel Signature

ADDITIONAL OFFICERS REQUIRED? ☒ Yes ☐ No

If yes please describe & include times Saturday - along course, during races.

Other (describe): _____

SAUGATUCK TOWNSHIP FIRE DISTRICT

☐ APPROVED

☐ DENIED

Authorized Personnel Signature

STREET CLOSURES: ☒ Yes ☐ No (use attached map to outline proposed closures)

Street closure date/time: _____

☐ A.M. ☐ P.M.

Street re-open date/time: _____

☐ A.M. ☐ P.M.

TBD pending
course review

SIDEWALK CLOSURES: ☐ Yes ☐ No (use attached map to outline proposed closures)

Describe Sidewalk Use: _____

Sidewalk closure date/time: _____

☐ A.M. ☐ P.M.

Sidewalk re-open date/time: _____

☐ A.M. ☐ P.M.

PARKING LOT CLOSURES: ☐ Yes ☐ No (use attached map to outline proposed closures)

Parking Lot Location: _____

Sidewalk closure date/time: _____

☐ A.M. ☐ P.M.

Sidewalk re-open date/time: _____

☐ A.M. ☐ P.M.

What parking arrangements are proposed to accommodate potential attendance: _____

APPLICATION CHECK LIST

- ☒ Completed Application
- ☒ Event Map (includes detailed event layout for vendors, booths, porta potties, etc.)
- ☒ Road/Sidewalk/Parking Lot Closure Map
- ☒ Certificate of Insurance (listing the City of Saugatuck as additionally insured)
- ☐ Fireworks Permit (if applicable)
- ☒ Michigan Liquor Control Commission Special Event License (if applicable)
- ☐ Health Department Food Service License (if applicable)

*processed after
approval city
application*

If document is missing, please explain: _____

The applicant and sponsoring organization understand and agrees to:

Provide a certificate of insurance with all coverages deemed necessary for the event, name the City of Saugatuck as an additional insured on all applicable policies and submit the certificate to the City Clerk's Office no later than one (1) week following notice of the event approval.

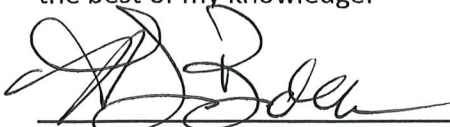
Comply with all City and County Ordinances and applicable State laws, City policies and acknowledges that the special events permit does not relieve the applicant or organization from meeting any application requirements of law or other public bodies or agencies.

Applicant and sponsoring organization further understands the approval of this special event may include additional requirements and/or limitations based on the City's review of this application. The applicant and sponsoring organization understands that it may be necessary to meet with City staff during the review of this application and that City Council approval is necessary.

Applicant understands that he/she is responsible for contacting the Michigan Liquor Control Commission and/or Allegan County Health Department to secure all permits required for this event.

Applicant agrees to defend, indemnify and hold harmless the City of Saugatuck, Michigan from any claim, demand, suit, loss, cost of expense or any damage which may be asserted, claimed or recovered against or from this Special Event by reason of any damage to property, personal injury or bodily injury, including death, sustained by any person whomsoever and which damage, injury or death arises out of or is incident to or in any way connected with the performance of this contract, and regardless of which claim, demand, damage, loss cost of expense is caused in whole or in part by the negligence of the City of Saugatuck or by third parties, or by the agents, servants, employees or factors of any of them.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event and affirm the above understandings. The information provided on this application is true and complete to the best of my knowledge.



Applicant Signature

Feb 20, 2024

Date

MT. BALDHEAD CHALLENGE

RACE ROUTES

Legend

- WS - Water Stations
- R - Restrooms
- 12 - Radio Positions
- 10k+
- 1/2 Marathon

**Re-Route
through Isabel's
to Ferry Street**

Race Start Line
Oval Beach

DUNES CAT
POS 9-14

RIVER CAT
POS 1-8

Race Finish Line
Coghlin Park

HARBOR CAT
POS 15, 24-30

LAKE CAT
POS 16-23



