



EVENT PERMIT



Ordinance 14-15

SECOND ANNUAL SNOW DAY

PERMIT NUMBER: TMP2016-00194

Date(s) of Event: October 1, 2016 from 11:00am until 3:00pm

Property Owner: VERWEST REAL ESTATE HOLDING

Applicant: DR TIM M VERWEST. DMD

Contact: JEFFREY SHAFER

Description: Pediatric Dentistry of Ft Myers Second Annual Snow Day featuring artificial snow machines and activities including bounce houses, 10x10 vendor spaces, and live music

Location of event: 8016 8034 SUMMERLIN LAKES DR FORT MYERS 33907
PEDIATRIC DENTISTRY OF FT MYERS/**239-482-2722 ext. 209

Will the event be attended by 1000 or more people ? Yes

Will the event be held on County Owned Property ? No

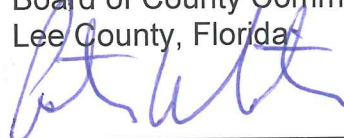
Will there be alcohol consumed or sold at the event ? No

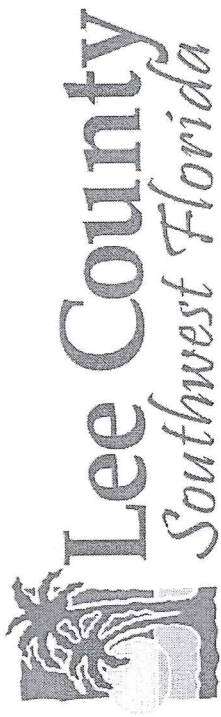
Will a bond be posted for this event ? No

Permit Conditions:

- * Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- * The premises is to be left in the same condition as it was prior to the event.
- * The permit is to be readily available for inspection during the entire event.
- * If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners
Lee County, Florida

 9-19-16
County Manager Date



Event Application

Special Event

Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

TM 2016-00194

Lee County Event Permit Application



Event Application

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Section I - GENERAL INFORMATION (All Permit Types)	
Title of Event / Name of Production	Pediatric Dentistry of Ft. Myers Second Annual Snow Day
Date(s) of Event / Production:	10/1/16
Location(s) of Event:	8106-8034 Summerlin Lakes Dr Ft. Myers, FL 33907
Name of Applicant:	Dr. Tim M. Verwest, DMD
Applicant Address:	8016 Summerlin Lakes Dr Ft. Myers, FL 33907
Applicant Phone Number:	239-482-2722 X 209
Contact Person: (If different from applicant)	Jeffrey Shafer/Geo Sarnelli
Contact Phone Number: (If different from applicant)	
Email Address:	communityoutreach@drverwest.com
Estimated Attendance:	1000
Event Description: Include each activity, when activities take place, etc.	The event is scheduled for 10/1/16 from 11:00 am to 3:00 pm. Snow day features artifical snow machines. There will be activities including bounce houses, 10 x 10 vendor spaces, and live music.
Hours of Operation:	11:00 am - 3:00 pm
STRAP # of Parcel:	2345240100000090
Owner of Premises*:	Dr. Tim M. Verwest, DMD

*Notarized statement from the property owner specifically consenting to the proposed use required.

Lee County Event Permit Application



Fill out the following questions for all permit types:

What is the Zoning Classification of the premises? Professional Building/19

Are any temporary structures to be installed for the event? [] Yes [X] No Type: _____

Do you have the appropriate permits for the temporary structures? [X] Yes [] No

* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities identified, including all parking areas.

Insurance Company Insuring the Event: Allstate Insurance Co. - Griffin Underwriting Services

Note: Certificate of Insurance must be submitted at time of application

Surety Company Bonding this Event (Name and Address): _____

Will Vehicles be Used as Part of This Event?

[] Yes [X] No

If yes, automobile coverage must be included on the certificate of insurance.

Will Food be Available at this Event?

[X] Yes [] No

If yes, products liability coverage must be included on the certificate of insurance.

Will Alcoholic Beverages be served/consumed at this Event?

[] Yes [X] No

If yes, liquor liability coverage must be included on the certificate of insurance.

Name & Address of Organization Providing Food: Kona Ice, Porkin Out, Sizzle Truck, Poultime Queen, Doner Kebab King Karl, BurgerQue

Type of Food being Served: Food Truck Service

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Pediatric Dentistry of Ft. Myers, Dr. Tim Verwest, DMD

Fill out this portion for applications for Solicitation in the County Rights-of-Way:

Name of Charity: Abuse Counseling Treatment, Inc. (ACT)

Address of Charity: 407 Center Rd. #11 Fort Myers, FL 33907

Phone Number: _____

Non-profit certificate/registration number: B5-8012559255C-7

(Proof of registration with the Dept. of Agriculture & Consumer Services §496.405 or proof the organization is exempt from this requirement. §316.2045)

Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT

Is alcohol being sold/consumed on County Property? [] Yes [X] No

If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.

Non-profit certificate/registration number: _____

(Required if alcohol is to be SOLD at the event)

Please note: A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for further details

Applicant Agreement - Signature Required



SECTION I - SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

SECTION II - INSURANCE

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted premises or improvement thereto, or arising from the use of the premises.

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

Applicant Agreement - Signature Required

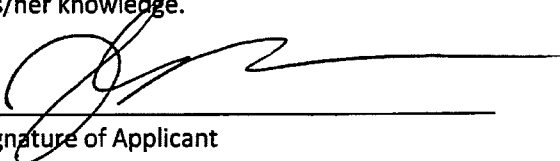


SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.



Signature of Applicant

Jeffrey Shafer Marketing Director

Print Name of Applicant and Title

6/8/16

Date



Witness

CHAD LYLE

Print Name of Witness

6-8-16.

Date

Lee County Event Permit Application



**LEE COUNTY SHERIFF'S DEPARTMENT
14750 SIX MILE CYPRESS PARKWAY
FORT MYERS, FLORIDA 33912
(239) 477-1199**

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:

Parking in authorized parking areas only. Applicant to get letters of consent from each business whose parking lot they are using for this event and submit to LCSO when permission is granted.

Deputies (How Many?):

None

Fee for Services:

None

Special Arrangements:

None

Print Name: Capt. Scott Lucia

Signature: *Capt. Scott K. Lucia*

Title: Special Events, Permits and Details

Date: 12 June 2016

Lee County Event Permit Application



FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.
Please see User's Guide for contact information and Fire District Map.

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Fire Guards (How Many?)

10 certified crowd managers

Fee for Services:

\$10.00

Flammable Vegetation:

Cleared from around tents and other exhibits

First Aid Equipment:

Call 911

Fire Extinguishing:

All exhibitors shall have a minimum 2A10BC extinguisher at exhibit. All food trucks shall be NFPA 96 compliant + have up to date inspections.

Special Arrangements:

Maintain FD access. Do not block water supplies or building access.

Print Name: Nate Busley

Signature: [Handwritten Signature]

Title: Acting Fire Marshal

Date: 6/22/16

Lee County Event Permit Application



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY
14752 SIX MILE CYPRESS PARKWAY
FORT MYERS, FL 33912
(239) 533-3911

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Treatment Facilities:	None necessary.
Medical Personnel:	None necessary.
Medical Supplies / Equipment:	None necessary.
Safety Requirements:	No additional precautions necessary.
Fee for Services	Not applicable.
Special Arrangements:	Please call 911 in the event of an emergency. To arrange special event coverage, contact our office at 239 533-3911.

Print Name: Benjamin Abes

Signature: Benjamin Abes Digitally signed by Benjamin Abes
Date: 2016.06.09 14:00:29 -04'00'

Title: Chief

Date: 06/09/2016

Lee County Event Permit Application



DEPARTMENT OF TRANSPORTATION
1500 MONROE STREET
FORT MYERS, FL 33901
(239) 533-8580

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
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AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:	No event parking on or within 10 feet of Lee County maintained road rights-of-way.
Ingress and Egress:	Use all established means of ingress and egress.
Special Arrangements:	Use Lee County Sheriff's Office for assistance with traffic control, as needed.

Print Name: Bryan Miller

Signature: Bryan D. Miller Digitally signed by Bryan D. Miller
Date: 2016.06.09 14:00:04 -04'00'

Title: Senior Project Manager

Date: June 9, 2016

Lee County Event Permit Application



LEE COUNTY PARKS AND RECREATION
3410 PALM BEACH BOULEVARD
FORT MYERS, FLORIDA 33916
(239) 533-7275

Check the appropriate box(es) below:

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AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

illumination:	N/A
Parking Areas:	N/A
Special Arrangements:	Event NOT on County property and will not affect parks and REC operations or programs.

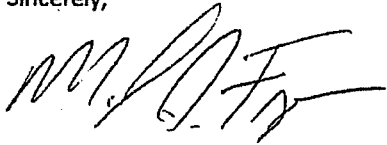
Print Name: Alise Flayjick
Signature: Alise Flayjick
Title: Deputy Director
Date: 6/13/16

Showing Oct. 2016

August 30, 2016

I, Michael Frye authorize Pediatric Dentistry of Ft. Myers, Dr. Tim Verwest, DMD usage of my empty lot located at 7990 Summerlin Lakes Dr, Ft. Myers, FL 33907 on the day of October 1, 2016 for Snow Day. The pediatric office promises to return the lot to the order it was in before the event.

Sincerely,

A handwritten signature in black ink, appearing to read 'M. Frye', with a horizontal line extending from the end of the signature.

Michael Frye

info@michaelfrye.com

RE/MAX Realty Group

7990 Summerlin Lakes Dr

Ft. Myers, FL 33907

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT
COUNTY ADMINISTRATION BUILDING - 4TH FLOOR
2115 SECOND STREET
FORT MYERS, FLORIDA 33901
(239) 533-2221

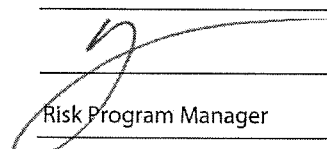
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- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Insurance Requirements: Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.

Special Arrangements: A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured.
Subject to proof of insurance.

Print Name: Mike Figueroa
Signature: 
Title: Risk Program Manager
Date: September 16, 2016



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/07/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Davies Insurance Inc. 390 Pondella Rd Ste 8 North Fort Myers FL 33903		CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: Mount Vernon Fire Insurance Co.		FAX (A/C, No): NAIC # 26522
INSURED Pediatric Dentistry of Fort Myers LLC 8016 Summerlin Lakes Drive Fort Myers FL 33907		INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:		

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-ECT <input type="checkbox"/> LOC		Y	CL2702185	10/01/2016	10/03/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 1,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ See L-535
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Certificate holder is named as Additional Insured per form CG2011 04/13.
** 10 days notice for non-payment of premium **
OLE WA 09/16/16

CERTIFICATE HOLDER Lee County Board of County Commissioners PO Box 398 Fort Myers FL 33902	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>[Signature]</i>
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Lee County Event Permit Application



**LEE COUNTY VISITOR & CONVENTION BUREAU
2201 SECOND STREET, SUITE 600
FORT MYERS, FLORIDA 33901
(239) 338-3500**

Check the appropriate box(es) below:

FILM PERMIT ONLY

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Special Arrangements:

Other:

Print Name: _____

Signature: _____

Title: _____

Date: _____

William D. Cronin
8000 Summerlin Lakes Drive LLC
8000 Summerlin Lakes Drive, Suite 200
Fort Meyers, FL 33907
239-443-3901

August 30, 2016

To whom it may concern,
I, William D. Cronin, authorize Pediatric Dentistry of Ft. Myers, Dr. Tim Verwest, DMD, usage of our parking lot located at 8000 Summerlin Lakes Drive, Ft. Myers, FL 33907 on the day of October 1, 2016 for Snow Day. The pediatric office promises to return the parking lot to the order it was in before the event.

Sincerely,

A handwritten signature in black ink, appearing to read 'William D. Cronin', with a long horizontal flourish extending to the right.

William D. Cronin
Cell: 719-440-3057
bc@hccscoding.com

Snow Day—Oct. 1. 2016 Schematic

Plannogram: Notes: Building is 77' X 76' (approx. size)-

Used building as a marker for other items

*Bounce houses take 30-60 min. each to set up

* Snow machines will take min. of 1-2 hours to set up

* Magic SNOW must be pre-mixed using a hose and 5 gallon buckets

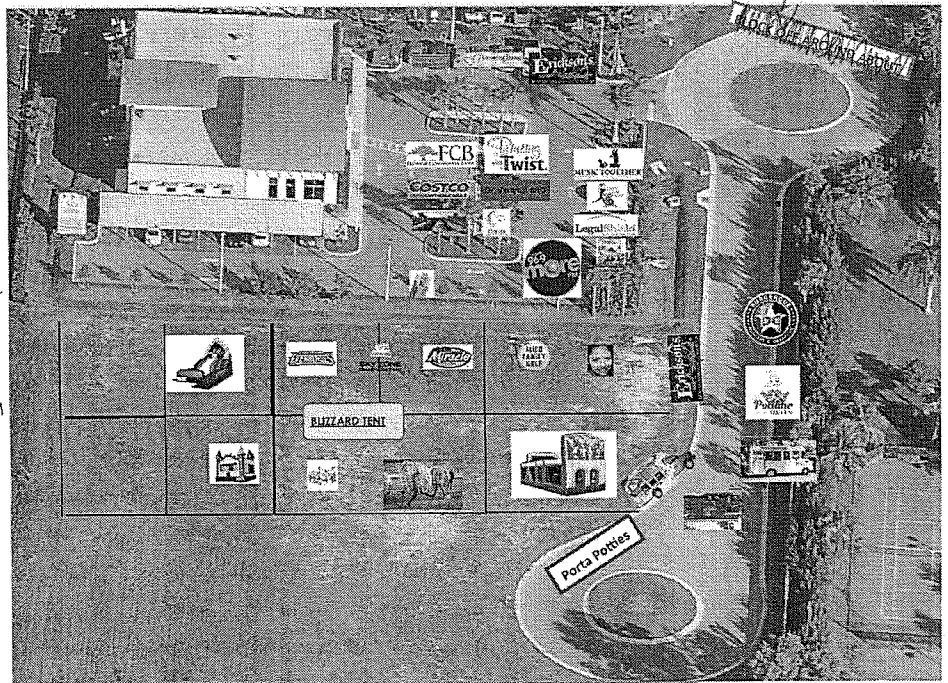
*Change time of event from 11-2pm to 11-5pm

*CALL: Robby the Magician

*IMPORTANT: Need to call The Vascular and Vein Center at Gulfcoast Surgeons at 239-334-7061 and ask them about parking on their lot (ask Jeff for help with this)

*IMPORTANT: Need to call Busey Bank and ask them about parking in their lot at 7980 Summerlin Lakes Dr. FM 33907 at 239-790-8000 (ask Jeff for help with this)

1. 30 ft. Obstacle Course—Place in 38' X 38' area
2. 23 ft. X 16 ft. X 13 ft. Dual wet/dry shark slide (will use magic snow at landing area)
3. The medium Castle 2 moonwalk bounce house (approx. 15 ft. X 15 ft.)
4. Small Bell Tower Bounce house (approx. 12 ft. X 12 ft.)
5. ACTUAL Linear Feet for fencing = 510 linear feet
6. Possible—Volunteer Run Obstacle Course (with prizes from ACT for each child that completes the course) —For this, we need to purchase 12 hoola hoops, 8 small safety cones, 2 jump ropes—On grass area (FREE activity)
7. Chalk Art Station—On parking lot for kids (FREE activity)



Vendors:

- 1.) Florida Community Bank 2.) Daniels Law Firm 3.) Costco 4.) Travel Agency 5.) Painting With A Twist
- 6.) Essential Oils 7.) ACT 8.) S. Ft. Myers High School 9.) 96.9 More FM 10.) Florida Skin Cancer Center
- 11.) Music Time Together 12.) Face Painting area

Food Trucks:

- 1.) BurgerQue 2.) Poutine Queen 3.) Doner Kebab King Karl 4.) KONA Ice 5.) Sizzle Truck 6.) Porkin Out



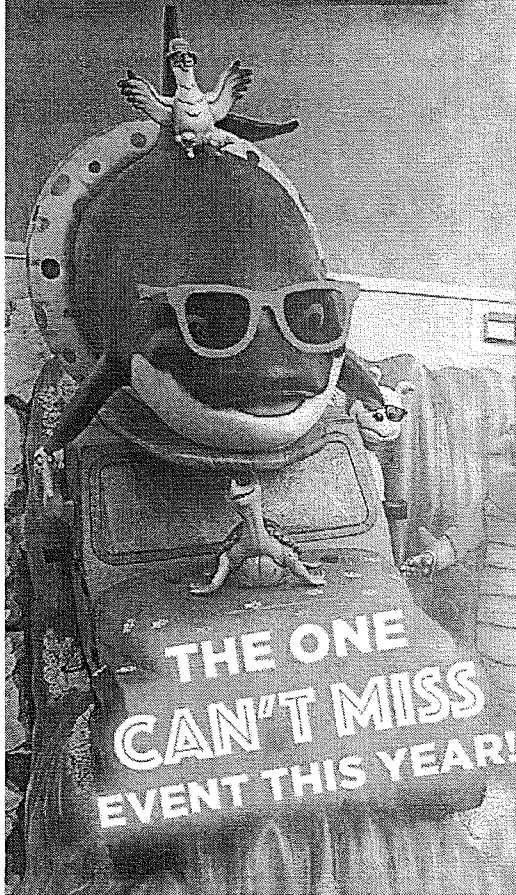
presents **THE SECOND ANNUAL**

SNOW DAY 2016

Saturday, October 1 • 11 am - 3 pm

PEDIATRIC DENTISTRY OF FT. MYERS
8016 Summerlin Lakes Dr.

Back up date in case of rain is Sunday, October 2



THE ONE
CAN'T MISS
EVENT THIS YEAR!

SNOW Special Effects
Disney Tribute Characters
Snowball FUN
Face Painting
Live Music & Entertainment
Various Food Trucks
Crafts & Games

FOR MORE INFORMATION VISIT
DrVerwest.com/SnowDay

PROCEEDS BENEFITING



Abuse Counseling & Treatment, Inc.

IN PARTNERSHIP WITH ...



Daniels Law, P.
FAMILY LAW / SOCIAL SECURITY DISAB.

