

**REQUEST FOR CITY COUNCIL CONSIDERATION**

Meeting Date: September 15, 2025

Agenda Item: 5C	Prepared for: Ryan Fabbri, City Manager
Agenda Section: Consent: Motion to Approve	Date: August 21, 2025
Subject: Annual North Myrtle Beach Christmas Parade	Division: Administration

**Background:**

Destination North Myrtle Beach and the City are requesting approval for the Annual Christmas Parade. This event is to be held on Saturday, December 6, 2025, between the hours of 5:30 PM and 7:30 PM. Set-up will begin at 3:30 PM, and dismantling will begin at 7:30 PM.

Please see the attached application and map.

All applicable departments have signed off on the special event either verbally or by email.

**Recommended Action:**

Approve or deny the Special Event Application

Reviewed by Department Head	Reviewed by City Manager	Reviewed by City Attorney
Council Action: Motion By _____ 2 <sup>nd</sup> By _____ To _____		



## FESTIVAL & SPECIAL EVENT DIRECTOR APPROVAL

Festival/Special Event: \_\_\_\_\_

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

	Approval	Denial	Method	Date
City Manager/Admin:	_____	_____	_____	_____
Finance:	_____	_____	_____	_____
Human Resources:	_____	_____	_____	_____
Information Technology:	_____	_____	_____	_____
Parks & Recreation:	_____	_____	_____	_____
Planning & Development:	_____	_____	_____	_____
Public Safety:	_____	_____	_____	_____
Public Works:	_____	_____	_____	_____

Date Sent for Director Approval: \_\_\_\_\_

Any Director Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date for City Council Approval: \_\_\_\_\_

Certificate of Liability Insurance sent to Risk Manager: \_\_\_\_\_

Special Event / Festival Permit Application

**Instructions**

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**I. Applicant & Sponsoring Organization Information**

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Sponsoring Organization Name                      Destination North Myrtle Beach

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Chief Officer of Organization                      Cheryl Kilday

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Applicant Name    Erin Graham

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Address    [REDACTED]

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Daytime Phone Number                              [REDACTED]

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Evening Phone Number                              [REDACTED]

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Fax    *Field not completed.*

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On-Site Contact Person                              Erin Graham

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Pager / Cell Phone Number                      [REDACTED]

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Is the city a co-sponsor?                              Yes

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What is the name of the city contact person?                      Angel Sylvester

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**II. Event Information**

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Event Name    Annual NMB Christmas Parade

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Purpose of Event    To provide a holiday event for locals and visitors.

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Event Date(s) 12/6/2025

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Event Date(s) *Field not completed.*

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Total Expected Attendance 2500

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Location Main Street NMB / Ocean Blvd.

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Event Hours 5:30 PM - 7:30 PM

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Set-Up Hours 3:30 PM - 5:30 PM

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Dismantle Hours 7:30 PM - 8:30 PM

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List any street(s) you are requesting to be closed as a result of this event. Include street name(s), day, date and time of closing and reopening:

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Street One Ocean Blvd. 11th Ave N to 1st Ave S

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Date / Time Closed 12/6/2025 3:30 PM

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Date / Time Opened 12/6/2025 7:00 PM

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Street Two Main Street - Ocean Blvd to Ye Olde Kings Hwy

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Date / Time Closed 12/6/2025 5:00 PM

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Date / Time Opened 12/6/2025 8:30 PM

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Street Three *Field not completed.*

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Date / Time Closed *Field not completed.*

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Date / Time Opened *Field not completed.*

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Street Four *Field not completed.*

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Date / Time Closed      *Field not completed.*

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Date / Time Opened      *Field not completed.*

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**III. Event Description**

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Does the event involve the sale of alcoholic beverages?      No

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Has State Permit been applied for or received?      Yes

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Will items or services be sold at the event?      No

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Will there be musical entertainment at your event?      Yes

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Number of Stages      1

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Number of Bands      0

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Type(s) of Music      Christmas

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Time Music Will Start & Stop      5:00 PM - 8:00 PM

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Name of Band(s)      N/A

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Will there be any tents or canopies at the proposed event site?      No

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Will there be any fireworks associated with this event?      No

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Has City Permit been applied for or received? Yes

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Will food be served at this event? No

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Have South Carolina Department of Health and Environmental Control (DHEC) requirements been met? N/A

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Will you provide portable toilets for the general public attending the event? No

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Will you require the use of City electricity? No

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Will you require the use of City water? No

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Will you require Traffic Control? Yes

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Will you require the use of City Personnel for trash removal? Yes

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Please list any other services you are requesting from the City of North Myrtle Beach. *Field not completed.*

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#### **IV. Fees & Proceeds**

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Is the sponsoring organization a "tax

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exempt, non-profit"  
organization as defined  
by the Internal Revenue  
Service (IRS)?

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Will admission fees be charged to attend the event? No

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Will fees be charged to vendors to participate in this event? Yes

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Please provide the amount(s). Participant fees: business \$100, individual/family \$35, Queens \$35, non-profit \$25, professional floats \$650

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If the sponsoring organization is not a "tax exempt, non-profit" organization, will donations be made to any charitable organization(s)? N/A

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## V. Event Site Map

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Prior to issuance of a Festival Permit, you are required to submit a Final Event Site map to the City.

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Attach a site map of the proposed event site indicating the locations of the following items: [Parade Route.pdf](#)

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## VI. Security

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Will this event require security to handle the event? No

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## VII. Page Information

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*Prior to the issuance of a Special Events Permit, proof of insurance will be required.*

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*You must provide an Original Certificate of Insurance showing you have purchased commercial general liability insurance that names “the City of North Myrtle Beach, its officers, employees and agents” as an additional insured. Insurance coverage must be maintained for the duration of the event. The amount of insurance coverage required will depend on the risk level of the event and will be determined by the City’s Risk Management Office depending on the nature of the event, additional coverage may be required.*

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## VIII. Affidavit

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Advance cancellation notice required: If this event is cancelled, please call 843-280-5604 with this information. Otherwise, City personnel and equipment may be needlessly dispatched and approvals of your future applications may be jeopardized.

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Electronic Signature Agreement      I agree.

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Electronic Signature      Erin Graham

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Date      8/11/2025

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Name of Applicant      Erin Graham

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Title      *Field not completed.*

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Applicant Email      

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Blue Line – Parade Line Up

Red Line – Parade Route

Green Line – End of Parade

Yellow Lines – Participants can pull off in any of these locations to unload but cannot stop or block the parade. If a route is presently being blocked remaining participants will be told to continue on to another location