

**REQUEST FOR CITY COUNCIL CONSIDERATION**

Meeting Date: March 16, 2026

Agenda Item: 5D	Prepared for: Ryan Fabbri, City Manager
Agenda Section: Consent: Motion to Approve	Date: March 9, 2026
Subject: Rock Hill Shag Club Beach Party	Division: Administration

**Background:**

Rock Hill Shag Club is requesting approval for a beach party on September 25, 2026. The gathering will be held between the hours of 12:00 PM and 5:00 PM. Set-up will begin at 8:00 AM, and dismantling will begin at 5:00 PM.

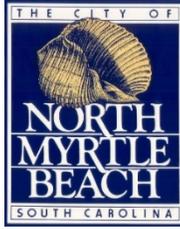
Please see attached application and map.

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: \_\_\_\_\_



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 *Field not completed.*

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Date / Time Closed *Field not completed.*

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Date / Time Opened *Field not completed.*

---

Street Two *Field not completed.*

---

Date / Time Closed *Field not completed.*

---

Date / Time Opened *Field not completed.*

---

Street Three *Field not completed.*

---

Date / Time Closed *Field not completed.*

---

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? No

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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 0

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Number of Bands 0

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Type(s) of Music Shag and Beach

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Time Music Will Start & Stop 12:30 PM - 5:00 PM

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Name of Band(s) No bands, just a DJ

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Will there be any tents or canopies at the proposed event site?

Yes

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Number of Tents

3

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Will any tent be over 30 by 30 feet in the area?

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?

No

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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?

No

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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?

No

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

No

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Please list any other services you are requesting from the City of North Myrtle Beach.

none

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.IV. Fees & Proceeds

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

Yes

Will admission fees be charged to attend the event?

No

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

No

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

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

Attach a site map of the proposed event site indicating the locations of the following items:

[SITE MAP FOR SEPT 2026 BEACH PARTY.pdf](#)

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#### .VI. Security

Will this event require security to handle the event?

No

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#### .VII. Page Information

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

*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      Debra S. Brown

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Date      2/16/2026

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Name of Applicant      Rock Hill Shag Club - Debra S Brown

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Title      President

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Applicant Email

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Mailing Information

*The original application should be clearly printed or typed and mailed to City of North Myrtle Beach, Attention: Administration, Event/Festival Application, 1018 2nd Avenue S, North Myrtle Beach, SC 29582.*

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ROCK HILL SHAG CLUB  
BEACH PARTY  
FRIDAY, SEPTEMBER 25, 2026

OCEAN BLVD.

