

Submission # 4666231  
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Time to Take Survey 8 minutes, 38 seconds

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**Permit #**

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**\* BUSINESS OR ORGANIZATION NAME**

Carl Sandburg High School Athletic Boosters Club

**\* BUSINESS OR ORGANIZATION NAME ADDRESS**

Carl Sandburg High School Athletic Boosters Club  
11104 Front St Unit 1A  
Mokena IL 60448

**\* PHONE #**

(708) 612-7558

**\* EMAIL**

nahs@cshsathleticboosters.com

**\* CONTACT PERSON**

Lauren Hedenschoug

**\* CONTACT PERSON ADDRESS**

11830 Shade Cove Ct  
Orland Park IL 60467

**\* PHONE #**

(708) 612-7558

**\* EMAIL**

lhedenschoug@gmail.com

**\* CHAIRPERSON OF SPECIAL EVENT**

Lauren Hedenschoug

**\* CHAIRPERSON ADDRESS**

11830 Shade Cove Ct  
Orland Park IL 60467

**\* PHONE #**

(708) 612-7558

**\* EMAIL**

lhedenschoug@gmail.com

**\* EVENT DAY CONTACT PERSON**

Lauren Hedenschoug

**\* EVENT DAY CONTACT PERSON ADDRESS**

11830 Shade Cove Ct  
Orland Park IL 60467

**\* PHONE #**

(708) 612-7558

**\* EVENT DAY CONTACT PERSON EMAIL**

lhedenschoug@gmail.com

**\* LOCATION AND ADDRESS OF EVENT**

153rd Street Metra/Centennial Park Walking Paths

**\* TYPE OF EVENT:**

5k

**\* EVENT ON PUBLIC PROPERTY**

ALL OTHER VILLAGE PROPERTY RENTALS

**\* EVENT ON PRIVATE PROPERTY**

OUTDOOR EVENT

**COMMERCIAL FILMING/PICTURES**

NON-COMMERCIAL FILMING/PICTURES ON PUBLIC PROPERTY

**\* DESCRIPTION OF EVENT**

5k event for Sandburg High School

**\* LIST DATES OF EVENT WITH HOURS OF OPERATION**

9/13/2026 from 8am-12pm

**\* SET-UP DATE & TIME**

09/13/2026 6:00 AM

**\* TEAR-DOWN DATE & TIME**

09/13/2026 12:00 PM

**\* APPROXIMATE NUMBER OF PERSONS INVITED AND/OR EXPECTED TO ATTEND OR PARTICIPATE**

200

(Additional Fees May Apply)

**\* WILL FOOD BE SERVED?**

YES

**\* WILL YOUR EVENT INCLUDE A FOOD TRUCK? (Food being prepared and served from the vehicle)**

NO

**\* WILL ALCOHOL BE SERVED? (If YES, contact Mayor's Office at 708-403-6160 and complete the "Application for Temporary Liquor License.")**

NO

**PHONE #**

(708) 612-7558

**EMAIL**

lhedenschoug@gmail.com

**\* WILL GENERATORS BE UTILIZED?**

NO

**If YES, please describe the size/type:**

**\*\*SKIPPED\*\***

**\* WILL THERE BE A RAFFLE? (Contact Village Clerk at 708-403-6150)**

NO

**PHONE #**

(708) 612-7558

**EMAIL**

lhedenschoug@gmail.com

**\* WILL THERE BE LIVE ENTERTAINMENT? (Music must end by 10:30PM Sun-Th, 11:30PM Fri-Sat)**

NO

**\* WILL THERE BE TEMPORARY SIGNAGE? (Banners, Inflatables, Etc.)**

YES

**\* WILL THERE BE A TENT?**

YES

**\* WILL THERE BE ANY STRUCTURES OTHER THAN A TENT? (Stage, Etc.)**

NO

**If YES, list structures:**

**\*\*SKIPPED\*\***

**\* WILL THERE BE ANY ROAD OR SIDEWALK OR RIGHT-OF-WAY CLOSURES?**

YES

**\* WILL THE EVENT BEGIN AT ONE LOCATION AND TERMINATE AT ANOTHER?**

NO

If YES, complete the questions below. If NO, sign and date to complete application.

**1. The route to be traveled, the starting point, the termination point, and the location of any stopping point, speakers' platforms, or similar, if any. (A. Provide Map, B. Google Aerial Image with route traced is OK.)**

Starting and ending point at parking lot in train station.

**Attachment**

**\*\*SKIPPED\*\***

**2. The approximate number of persons who, and animals and vehicles which, will constitute the event, types of animals, and description of the vehicles.**

none

**3. The hours when the event will start and terminate.**

8-10am

**4. Please provide a statement as to whether the event will occupy all or a portion of the width of the streets proposed to be traversed.**

no main streets. This will take place through the walkways of the baseball fields and parking lots

**5. The location of any assembly areas for the event.**

train station 153rd parking lot

**6. The time and location at which units of the event will begin to assemble at any such assembly area or areas.**

9/13/2026 6am-8am

Please attach the above information if your event falls into the applicable category.

**\* APPLICANT NAME**

Lauren Anne Hedenschoug

**\* DATE**

03/03/2026

\*

**I attest that the information provided above is to the best of my knowledge accurate. I understand that by checking this box and providing my name and date above, this also acts as my signature.**

Checking this box also acts as my signature.