

## Request for Quotes

The Frederick County Parks and Recreation Department is seeking offers for a Non-Profit Organization that benefits the area homeless to partner with for the Battlefield Half Marathon. Partnering organizations will provide a specified volunteer base in exchange for being named the recipient of a pre-determined portion of the proceeds after all expenses have been met. Successful offers must meet the guidelines articulated in the RFQ.

All offers must be submitted in a sealed envelope, clearly marked “**BATTLEFIELD HALF MARATHON QUOTE**” and sent to the Frederick County Parks and Recreation Department, 107 North Kent Street, 2<sup>nd</sup> Floor, Winchester, VA 22601 no later than 5:00 PM, March 13, 2020.

Questions regarding this request should be directed to Andrew Keefauver (540) 665-5678 or by email at [akeefauv@fcva.us](mailto:akeefauv@fcva.us).

Frederick County reserves the right to reject any and all offers.



F R E D E R I C K   C O U N T Y  
P A R K S   &   R E C R E A T I O N

Frederick County Parks and Recreation Department  
Partnering Organization Specifications

**I. Introduction**

Frederick County Parks and Recreation Department (FCPRD) held the inaugural Battlefield Half Marathon at the Kernstown Battlefield and surrounding area in 2014. In an effort to make the event successful FCPRD finds it necessary to partner with an organization that can provide a large volunteer base to facilitate the many numerous tasks required to provide an event of this magnitude. This is a yearly event typically held the first weekend in November.

**II. Partnering Organization Responsibilities**

The partnering organization must meet the following criteria:

- A. Serve the Frederick County, VA community
- B. Provide services to the area homeless
- C. Provide FCPRD with the volunteers as outlined in Attachment A
- D. Provide FCPRD with a copy of the organization's most current IRS Form 990

If selected, the partnering organization must provide to Frederick County:

- A. A certificate of liability insurance naming Frederick County, VA as the additional insured by July 1
- B. A substitute W-9 Form with ACH information by November 1
- C. Have all required volunteer positions filled by October 6

**III. Economic Potential**

The Partnering Organization will be named as the beneficiary of the Battlefield Half Marathon and will receive a donation determined primarily by event revenue less direct program expenses.

**IV. Special Requirements**

- A. The Partnering Organization must have all required volunteer positions filled by October 6. If they are not, the quality of the event and success of future events will be impacted, therefore a fee of \$100 per volunteer will be deducted from the overall donation. If net proceeds are less than this amount, the Partnering Organization will be billed for the remainder.
- B. The County reserves the right to extend the scope of this agreement for four (4) additional one (1) year periods if FCPRD approves of the performance of the Partnering Organization.

- C. If two or more organizations can meet the scope of this request, the awarding organization will be chosen by organization history and experience as outlined in Attachment B.
- D. During the performance of this contract, the Partnering Organization agrees as follows:

The PARTNERING ORGANIZATION will not discriminate against any volunteer because of race, religion, color, sex, or national origin, except where religion, sex, or national origin is a bona fide occupational qualification reasonably necessary to the normal operation of the PARTNERING ORGANIZATION.

**V. Offer Due Date and Instructions**

Offers are required to complete the information in Attachment C and are due by 5:00 p.m. on Friday March 13, 2020. Incomplete information or offers received after this date and time will not be considered. Offers may be mailed or hand-delivered. An official representative of the organization must sign the offer signifying their acceptance and compliance with the terms and conditions listed in this request for quote.

Submit one original, signed offer with attachments in a sealed envelope to:

Mailing/Delivery Address:  
Frederick County Parks and Recreation Department  
Attn: Battlefield Half Marathon Quote  
107 North Kent Street  
Winchester, VA 22601

## **Attachment A**

### **Required Number of Volunteers and Times**

1. Health and Wellness Expo: Friday November 6, 2020 3:30 p.m.8:30 p.m.

Volunteers Needed: 15

Assignments:

Registration, Hand out T-shirts, Hand out participant bags, Information Booth, Map Readers

- Race packet volunteers must verify a participants first and last name and determine that they have paid in full, hand out race bib and participant bag
- Registration volunteers must have participants fill out a registration form, collect money, hand out race bib and participant bag
- T-shirt volunteers will hand out race shirts to participants
- Volunteers will hand out bags to participants
- Information Booth volunteers will hand out race maps and answer any questions about the event
- Map Readers will have large course maps and walk participants through the course

2. Race Day: Saturday November 7, 2020

(A) Race Packet Pick-up/T-shirt (5:30 a.m.-8:00 a.m.)

Volunteers Needed: 3

Assignments:

- Race packet volunteers must verify a participants first and last name and determine that they have paid in full, hand out race bib and participant bag
- T-shirt volunteers will hand out race shirts to participants

(B) Course Marshals (7:00 a.m.-2:00 p.m.)

Volunteers Needed: 5

Assignments:

- Help direct runners out of the gate at the entrance to the battlefield

(C) Hydration Station Managers (7:00 a.m.-2:00 p.m.)

Volunteers Needed: 21

Assignments:

- Hydration station managers are assigned to pre-determined locations along the course to handout water/sports drinks to runners as they pass

(D) Post Race Refreshments (7:00 a.m.-2:00 p.m.)

Volunteers Needed: 10

Assignments:

- Volunteers for food will make sure all food is completely stocked and will clean up area after participants leave

(E) Finish Line Medals (9:00 a.m.-2:00 p.m.)

Volunteers Needed: 10

Assignments:

- Volunteers will hand out medals to runners as they cross the finish line

## **Attachment B**

If more than one organization meets the criteria and responsibilities as outlined in this RFQ, the following criteria will be used to score all potential Partnering Organizations. Responses for the following will be weighted equally on a scale of 1-4 with 4 being the most desirable.

- A. Total number of adult (ages 18+) volunteers who are active in the organization
- B. Number of people served annually
- C. Past experience with special events
- D. What service your organization provides

If two or more organizations are tied, the amount of financial assistance or services donated by the County of Frederick in 2020 to your organization will be used as the determining factor. The organization receiving the least amount of support will be awarded the contract.

**Attachment C**

**OFFER FORM**

(attach additional pages as necessary)

Organization Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Please provide a brief history of your organization and how you serve the citizens of Frederick County. Please include a brief description of any previous volunteer experiences that relate to the services required of this offer: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What does your organization provide to the recipients of your program? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Did your organization currently receive funding or support from Frederick County in 2019?  
Please provide details:

\_\_\_\_\_

\_\_\_\_\_

**Attachment C  
(Continued)**

**OFFER FORM**

(attach additional pages as necessary)

Please provide the following information:

- A. Number of active adult volunteers. ***MUST*** attach roster. \_\_\_\_\_
- B. Number of people served in 2019. \_\_\_\_\_
- C. List of community special events your organization has provided or volunteered with. \_\_\_\_\_
- D. Does your organization provide a basic necessity to the less fortunate such as food, shelter, or clothing? If so what? \_\_\_\_\_
- E. Did your organization receive a monetary donation or a good/service from Frederick County in 2019? \_\_\_\_\_
- F. Please attach IRS Form 990.

I, the undersigned as a representative for \_\_\_\_\_ agree that the \_\_\_\_\_ (organization) can provide the specified number of volunteers to fill the duties of this agreement as outlined in Attachment A. I also understand the financial implications to my organization if we fail to provide the required number of volunteers.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_