

**Menlo Park Community Services Department**

701 Laurel Street

Menlo Park CA 94025

650.330.2200, fax 650.324.1721

[www.menlopark.org](http://www.menlopark.org)



# PICNIC AREAS

**PICNIC AREA DESCRIPTION:**

Burgess and Nealon Parks are the only areas that have picnic tables for rent. Without a reservation, these picnic areas are first come first serve. Please keep in mind that the recommended ratio of tables to picnic guests is approximately 1:8. Picnic groups can not exceed 100 people. Picnic rentals are prohibited from engaging in any commercial activities for private profit. See below for detailed maps of the picnic areas. In addition, Sharon Park can be rented for Wedding Ceremonies ONLY. Wedding receptions are not allowed. All other parks are for public use on a first come first serve basis.

<i>Picnic Area</i>	<i>Tables</i>	<i>BBQ</i>
Burgess Picnic Area #1	3	1
Burgess Picnic Area #2	2	1
Burgess Picnic Area #3	3	1
Burgess Picnic Area #4	3	1
Burgess Picnic Area #5	2	1
Burgess Picnic Area #6	1	No
Burgess Picnic Area #7	2	No
Nealon Picnic Area #1	1	No
Nealon Picnic Area #2	1	No
Nealon Picnic Area #3	1	No
Nealon Picnic Area #4	1	No

**FEES:**

Fees are based on one hour of use and on the number of in your party.

Guests	Resident Fee	Non-Res Fee
1-25	<b>5.00</b>	<b>10.00</b>
26-50	<b>8.00</b>	<b>16.00</b>
51-75	<b>11.00</b>	<b>22.00</b>
76-100	<b>14.00</b>	<b>28.00</b>

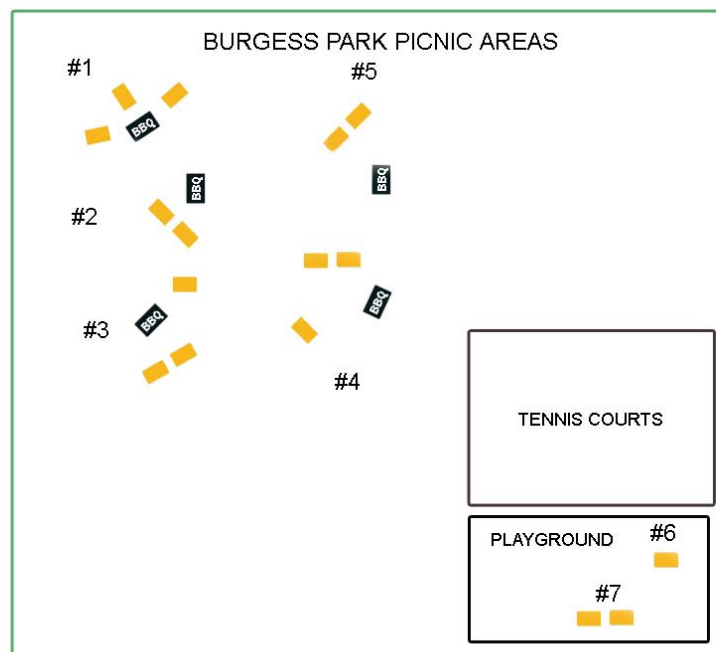
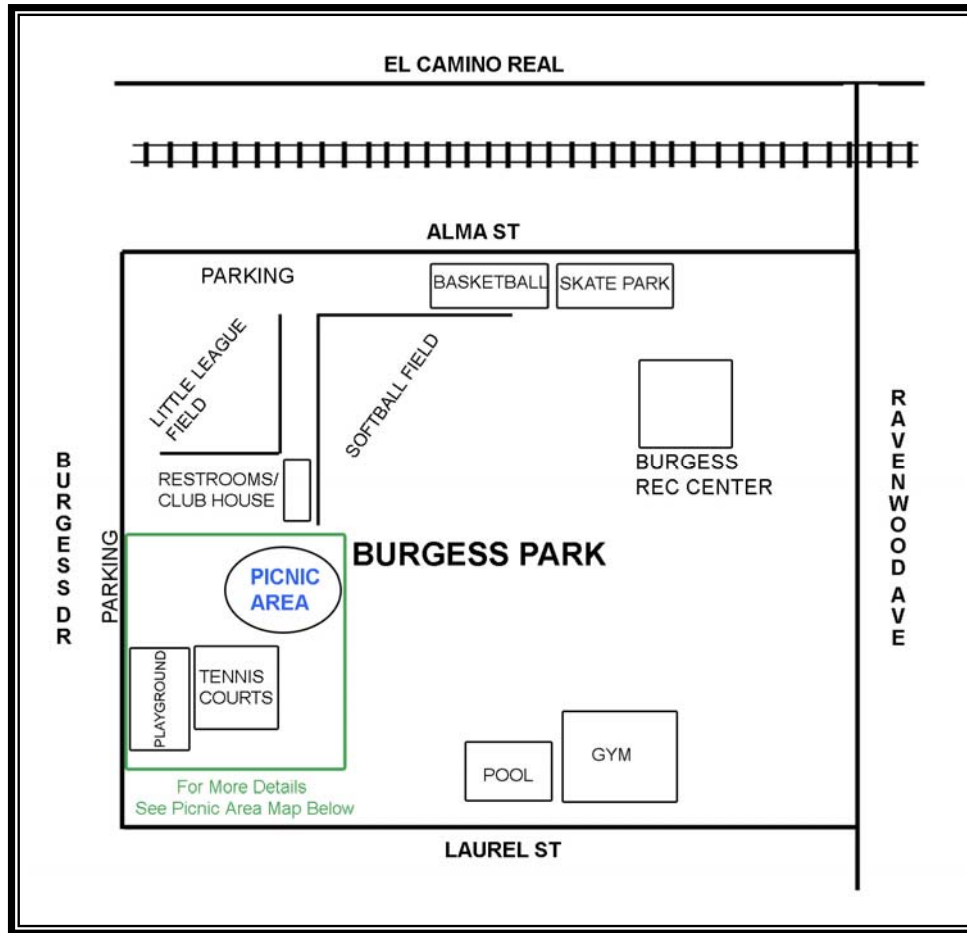
Sharon Park Weddings	Resident Fee - \$150.00	Non-Resident Fee \$250.00
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**Please note:** Sharon Park has limited parking and no bathrooms.

**STEPS FOR MAKING A PICNIC AREA RESERVATION:**

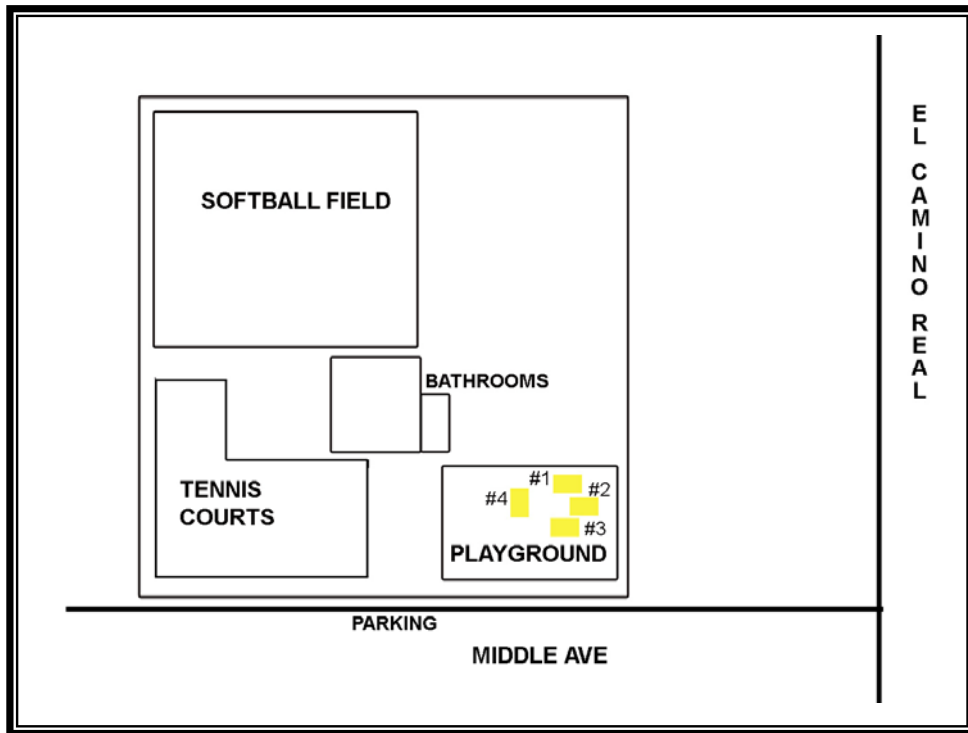
- 1) Liability Insurance:** Liability Insurance required for all picnic reservations. Participant must bring proof of liability from their insurance company naming the City Of Menlo Park as additionally insured. No reservations can be accepted without an insurance certificate. See “*Rental Insurance Requirements*” for more information.
- 2) Picnic Area Reservation Form:** Fill out the picnic area reservation form and provide the payment for the reservations. No reservation is confirmed until the completed reservation form has been approved and the fees have been paid in full.
- 3) Confirmation:** You will receive a receipt of payment and confirmation notice in the mail. Bring this receipt with you to your picnic area.

### Burgess Park

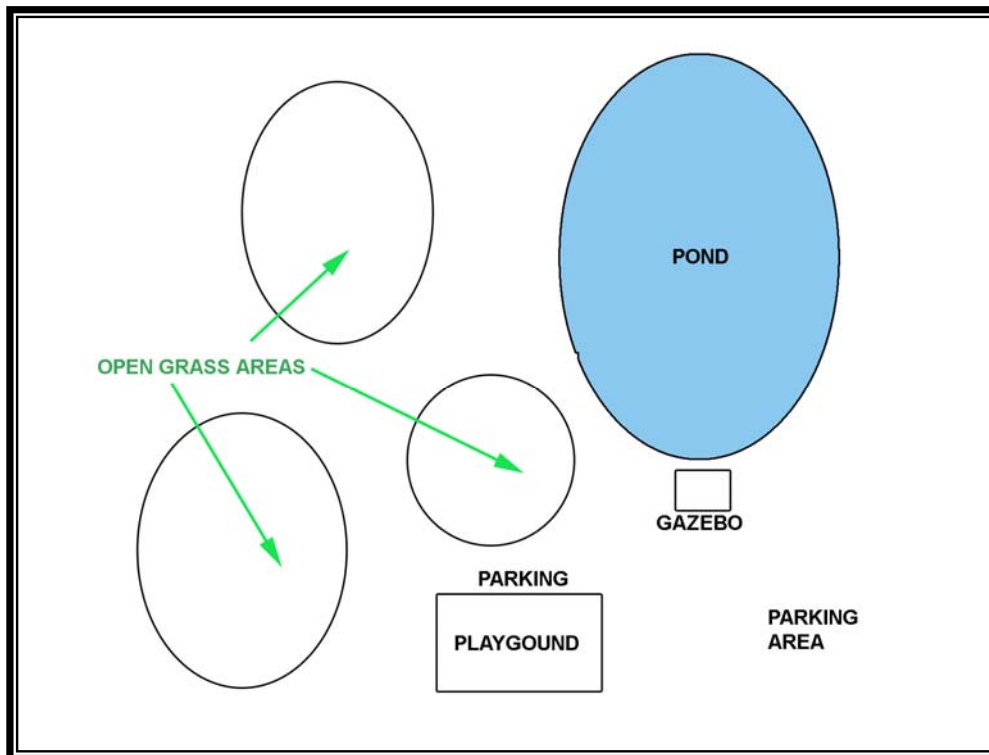


BURGESS DR

# Nealon Park



# Sharon Park





## PICNIC AREA RESERVATION FORM



**Facility Requested:** \_\_\_\_\_ **Areas:** \_\_\_\_\_

**Day:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Times:** \_\_\_\_\_

**Organization Name:** \_\_\_\_\_ **Size of Group:** \_\_\_\_\_

**Applicant's first name:** \_\_\_\_\_ **Applicant's last name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home Phone #: ( )** \_\_\_\_\_ **Work Phone #: ( )** \_\_\_\_\_

**Emergency contact:** \_\_\_\_\_ **Phone #: ( )** \_\_\_\_\_

To reserve a picnic area, please be sure all necessary items are submitted at the time of reservation. No reservation is confirmed until we received a certificate of liability insurance; the completed application has been approved; and the fees have been paid in full. Approval is dependant upon the intent of use, availability, and the applicants' agreement to abide by the terms and conditions listed.

**CANCELLATIONS:** The *City of Menlo Park Community Services Department* requires a minimum of one week written notification of any rental cancellation. A \$15.00 fee will be charged for any cancellations. All fees will be forfeited if events are cancelled without minimum notification.

### **APPLICATION / CONTRACT:**

- Groups are responsible for cleaning the picnic area after use and are required to remove all garbage from park / premises. Weekend picnic site clean up is not always available and walk-on groups do not always leave the sites clean. Do not over load garbage cans; use dumpsters located behind the Burgess Gym.
- No amplified music is allowed in the park. To obtain a noise permit, please contact the city's Planning Department (90 days notice required).
- No vehicles are allowed on picnic grounds or surrounding grass areas.
- No stakes are allowed in the grass.
- All special activities and equipment must have prior approval of the City of Menlo Park Community Services Department including use of jumpers, personal barbeques, or any additional equipment.
- Only beer and wine are permitted in the park. No glass, bottles or hard liquor are allowed.
- For any field rentals adjacent to the picnic areas, please contact the Gymnasium (330-2220).

- Please have your receipt with you the day of the picnic reservation. If another group is in your area, show them your receipt and inform them of your reservation. If they refuse to move, call the Menlo Park Police Department at 330-6300 and they will resolve the situation.

I hereby certify that I shall be personally responsible on behalf of myself/organization for any damage sustained by the *City of Menlo Park Community Service Department*, park equipment, furniture, or facilities as a result of the occupancy of said premises by myself/organization. I agree to abide by and to enforce the rules, regulations, and policies of *the City of Menlo Park Community Services Department* affecting the use of recreation facilities.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Resident Fees:** To qualify, you must submit a copy of your utility bill or Driver's License showing your current address within incorporated Menlo Park.

**Payment Method:**

<input type="checkbox"/> <b>Check</b> <b>MAIL-IN</b> Community Services Department 701 Laurel Street, Menlo Park, CA Make Check Payable to: City of Menlo Park <b>\$15 charge for returned checks</b> <b>WALK-IN</b> Rec Center, 700 Alma Street	<input type="checkbox"/> <b>Visa card</b> <input type="checkbox"/> <b>Mastercard</b> Expiration Date: _____ Account #: _____ Account Holder Name: _____ I agree to pay the above charges. I authorize the City of Menlo Park to charge these costs to my credit card. Authorized Signature: _____ <b>FAX: 650.324.1721 or 650.327.7046</b> <b>MAIL-IN or WALK-IN: "See address"</b>
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**OFFICE USE ONLY**

**Receipt Number:** \_\_\_\_\_ **Processed by:** \_\_\_\_\_ **Picnic / Facility Fee:** \_\_\_\_\_

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# **Rental/ Insurance Requirements**

To rent a picnic area, swimming pool, or room, one must first provide *Certificate of Liability Insurance* along with their application and payment for the rental.

A Certificate of Liability Insurance can be issued by the renter's homeowner's insurance or other insurance carrier. In order for the certificate to be valid, it must contain the following:

- **The renter's name must be listed as the one "insured."**
- **The policy must not expire before the planned picnic date.**
- **The policy must be for \$1,000,000.**
- **The "description" should list the rental location, day, and event planned.**
- **The City of Menlo Park at 701 Laurel Street, Menlo Park, CA 94025 must be noted as "additional insured."**

We cannot make a reservation before we receive the required application, payment and insurance.

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MMDD/YYYY)

<b>PRODUCER</b>  	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
<b>INSURED</b>  	<b>INSURERS AFFORDING COVERAGE</b> INSURER A: INSURER B: INSURER C: INSURER D: INSURER E:	<b>NAIC #</b>  

**COVERAGES**

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MMDD/YY)	POLICY EXPIRATION DATE (MMDD/YY)	LIMITS
		<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$  BODILY INJURY (Per person) \$  BODILY INJURY (Per accident) \$  PROPERTY DAMAGE (Per accident) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

<b>CERTIFICATE HOLDER</b>  	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE
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