CITY OF PALO ALTO	City of Palo Alto Community Services Department
	Group Picnic Site Application (Residents Only)
Today's Date: Name:	Company/Organization: Email:

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

 City:
 \_\_\_\_\_\_

 Zip:
 \_\_\_\_\_\_

Only Palo Alto residents or businesses (proof of residency is required) may reserve one Group picnic site per day up to six (6) months in advance. If you plan to serve beer and/or wine at your group site, an Alcohol Use Permit form must be submitted at the time of the application. A \$1,000,000 insurance certificate "naming the City of Palo Alto as additional insured" must be submitted 5 days prior to the date of your picnic or the reservation will be cancelled. This Certificate of Insurance is non-refundable and non-transferable. The certificate may be obtained through your personal insurance carrier, or purchased from the City of Palo Alto. Fax the completed applications to (650) 321-5612 or email to csd@citvofpaloalto.org. For more information, please call (650) 463-4949.

## Rinconada Park

Sequoia Site

\$ 58: includes 5 picnic tables and 5 barbecues, maximum occupancy 50 people.

## Mitchell Park

Pine Grove

\$129: includes 11 tables and 10 barbecues, maximum occupancy 110 people.
\$104: includes 9 tables and 6 barbecues, maximum occupancy 90 people.
\$71: includes 6 tables and 5 barbecues, maximum occupancy 60 people.

Redwood

- East Meadow
- Arbor

\$ 71: Includes 6 tables	and 5 barbecues,	maximum occup	bancy 60 people.
\$ 46: includes 4 tables	and 4 barbecues,	maximum occup	pancy 40 people.

Park Site Desired	No. of People Expected	Will alcohol be served?	Day of the Week	Date	Fees
		Yes No			

By signing this application, I certify that I have read and understand the Park Rules and Regulations, agree to inform persons participating in this activity of the terms and conditions, and will comply with any conditions set forth therein. I also agree to hold harmless and indemnify the City of Palo Alto, its officers, agents and employees from any and all liability or personal injury, death or property damage arising from or connected by the use or occupancy of recreational facilities.

Applicant Signature: Staff Approval:

CVV:

## I authorize the use of my credit card:

Name on Card: \_\_\_\_\_

Last 4 Digits: \_\_\_\_\_

\*In order to pay by credit card, please visit one of our community centers or save your credit card number in your Enjoy! account.