

Name:

City of Palo Alto Community Services Department

Individual Picnic Table Application

(\$36 R and \$41 NR per table)

Prior to submitting your application, please make sure you have an Enjoy Online account, and have saved your credit card to your account for expedited processing.

You may do so, online, by visiting, <u>cityofpaloalto.org/enjoyonline</u> or in-person, at Lucie Stern Community Center (Rinconada Park Picnic Reservations) or Mitchell Park Community Center (Mitchell Park Picnic Reservations).

Today's Date: _____ Company/Organization: _____

Email:

Address:		City:		Zip:	
Cell phone:					
two (2) picnic tables, No reservations will b	Monday througl oe made after 5: first-come, first ess the weekday	h Thursday (8:30 30pm on Thurso -serve basis, at r	am to 5:30pm) for days. Tables that h o cost. No reserva	est to reserve one (1) or the upcoming weekend. ave not been reserved ations/fees are required application to	
Only 2 tables per par tables to form a large				lowed. Reserving multiple TED.	
Park	Table #'s	Day of Week	Date	Fees	
Regulations, agree to and will comply wit indemnify the City o	o inform person th any condition f Palo Alto, its th or property o	ns participating ons set forth th officers, agents	in this activity of nerein. I also agro and employees fr	tand the Park Rules and the terms and conditions ee to hold harmless and om any and all liability or d by the use or occupancy	,
Applicant Signature:			Date:		
l authorize the use of r	my credit card:				
Name on Card:					
Last 4 Digits:	_				
Staff Approval:		Date	e:		



