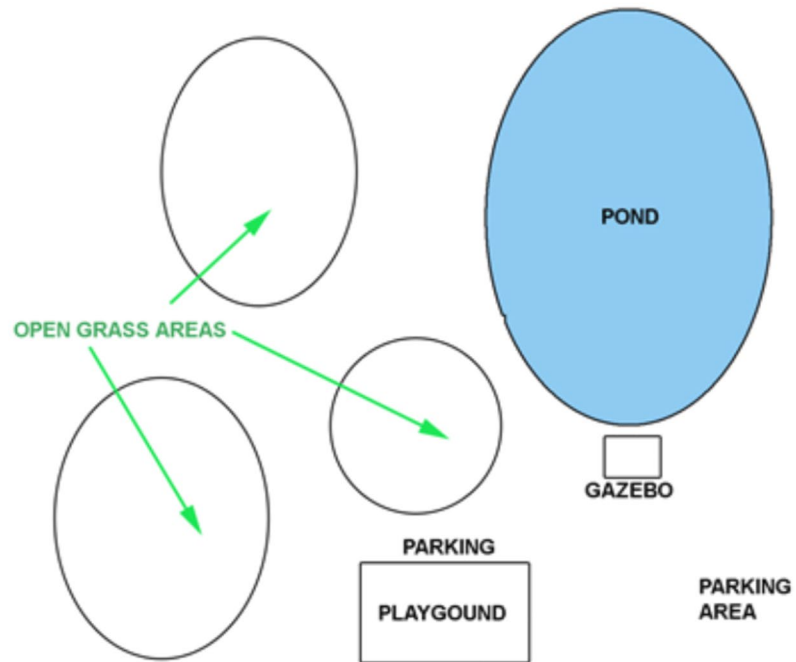


# SHARON PARK RENTAL INFORMATION

Community Services  
Arrillaga Family Gymnasium  
600 Alma St., Menlo Park, CA 94025  
tel 650-330-2220 fax 650-330-2242



Description	
<p>Located in Sharon Heights, close to I-280 and Sand Hill Road, the park provides a beautiful spot for wedding ceremonies. The park is 9 acres and includes natural wooded area, picturesque lake, and landscaped slopes. In addition, there is a gazebo, shaded picnic areas, playground, and walkways with benches. Parking is limited and there are no restrooms. The park can be reserved for wedding ceremonies only. Wedding receptions are not allowed. Otherwise, the park is open to the public as first-come, first-serve. Please be aware that this park is non-exclusive use only.</p>	
Fees	
<p>Sharon Park rental fee is a flat one day fee. Resident must provide proof of residency.</p>	
Resident Fee	Non-Resident Fee
\$150	\$250
Rental information	
<ul style="list-style-type: none"><li>Groups are responsible for cleaning the park area after use and are required to remove all garbage from park and premises. Do not over load garbage cans. Groups or individuals who fail to clean area after use, may be denied future use of City of Menlo Park facilities.</li><li>No amplified music is allowed in the park. To obtain a noise permit, please contact the city's Planning Department (60 days' notice required).</li><li>No vehicles are allowed on grass areas near the park.</li><li>No stakes are allowed in the grass areas.</li><li>All special equipment must have prior approval of City of Menlo Park Community Services including use of jumpers, portable restrooms, or any additional equipment.</li><li>Please have your receipt with you on the day of the 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 650-330-6300 and they will resolve the situation.</li></ul>	
Reservation process	
<p>A. Reservation Form: Forms are accepted in person only on a first come, first serve basis and can be submitted up to one year in advance. To secure a reservation, a completed form and full payment must be submitted. Verification of residency must be provided at the time of reservation and the applicant must be at least 18 years of age. We reserve the right to refuse rental or use to groups or individuals who have previously used the facilities and left it in poor condition. In the event that the reserved area(s) is needed for City use or maintenance, the City of Menlo Park reserves the right to reschedule, relocate, or deny a request previously approved. In this event, the group or individual will be given as much advance notice as possible.</p> <p>B. Liability Insurance: Liability Insurance required for all reservations. The renter must bring proof of insurance from their insurance company for one million dollars, naming the City of Menlo Park as additionally insured. The certificate must be submitted at least two weeks prior to the rental date. No reservation will be confirmed without proof of insurance. A Certificate of Liability Insurance can be issued by the renter's, homeowner's, or other insurance carrier. In order for the certificate to be valid, it must contain the following:</p> <ul style="list-style-type: none"><li>The renter's name must be listed as the one "insured."</li><li>The policy must not expire before the event date.</li><li>The policy must be for \$1,000,000.</li><li>The "description" should list the rental location, day, and event planned.</li><li>The City of Menlo Park at 701 Laurel Street, Menlo Park, CA 94025 must be listed as "additional insured."</li></ul> <p>C. Confirmation: No reservation is confirmed until the completed reservation form has been approved, all fees have been paid, and the insurance certificate is submitted. Approval is dependent upon intended use, availability, and applicants' agreement to abide by the terms and conditions listed herein. Bring the receipt with you to your picnic reservation as proof of the reservation.</p>	

**Map**

# RENTAL INSURANCE REQUIREMENTS

Community Services  
701 Laurel St., Menlo Park, CA 94025  
tel 650-330-2200  
fax 650-330-2242



## Information

A Certificate of Liability Insurance is required for all field, gym, and indoor facility rentals, all non-resident picnic rentals, and any picnic rentals (resident or non-resident) serving alcohol or using special equipment such as, but not limited to, additional cooking apparatuses, tents/canopies, bounce houses and other inflatables.

In order for a Certificate of Liability Insurance to be valid, it must contain the following:

- The renter's name must be listed as the one "insured". Please note: we do not accept insurance from a third party such as a bounce house company, caterer, etc.
- The policy must not expire before the planned event 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 the certificate holder.

Please pg. 2 for a sample Certificate of Liability Insurance.

## Sample certificate



# SAMPLE

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

INSURED  <div style="border: 1px solid red; padding: 2px; display: inline-block;">Renter's name</div>	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

## COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$
							MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$
							GENERAL AGGREGATE \$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						\$
	OTHER:						\$
A	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY	<input type="checkbox"/> NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident) \$
							ANY AUTO CSL \$
B	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> OCCUR					AGGREGATE \$
	<input type="checkbox"/> CLAIMS-MADE						\$
	DED \$	RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input type="checkbox"/> N	N/A				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Date and time of event.

City of Menlo Park is named as an Additional Insured

## CERTIFICATE HOLDER

## CANCELLATION

<div style="border: 1px solid red; padding: 5px;">           City of Menlo Park            701 Laurel Street             Menlo Park CA 94025         </div>	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <hr/> AUTHORIZED REPRESENTATIVE
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# SHARON PARK RENTAL FORM

Community Services  
Arrillaga Family Gymnasium  
600 Alma St., Menlo Park, CA 94025  
tel 650-330-2220 fax 650-330-2242



<b>Rental to:</b>				
Name:		Date:		
Phone:		Email:		
Address:		City:	State:	Zip:
Estimate attendance:		Use:	Insurance required: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Rental of:</b>				
<b>Date</b>	<b>Day</b>	<b>Start time</b>	<b>End time</b>	<b>Total hours</b>
<b>Total hours</b>				
<b>Total rental fees</b>				\$
Description of event:				
<i>(Attach additional documents if needed)</i>				

I hereby certify and agree that I shall be personally responsible on behalf of myself/organization for any damage sustained by the facility, equipment, or premises as a result of the occupancy of said facility by my group/organization. Approval is dependent upon the intended use, availability and the applicant's agreement to facility rental terms. The City of Menlo Park is not responsible for arrangements made and expenses incurred if your application is not approved. I hereby waive, release, discharge and agree to indemnify, defend and hold harmless the City, its officers, employees, and agents from and against any and all claims by any person or entity, demands, causes of action or judgments for personal injury, death, damage or loss of property, or any other damage and/or liability occasioned by, arising out of, or resulting from this reservation or use of the facilities. I hereby declare that I have read and understand and agree to abide by and to enforce the rules, regulations, and policies affecting the use of the facilities.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of supervisor (approved by)

\_\_\_\_\_  
Date

<b>Payment information</b>	
___ Cash    ___ Check    ___ Visa    ___ Mastercard	
Please make all checks payable to: City of Menlo Park. <b>Note: There is a \$30 charge for returned checks.</b>	
Account # _____ Exp. _____ Account Holder Name: _____	
I agree to pay the above charges and authorize the City of Menlo Park to charge these costs to my credit card.	
Authorized Signature: _____	

## OFFICE USE ONLY:

Receipt #: \_\_\_\_\_ Date: \_\_\_\_\_ Residency Verified: \_\_\_\_\_ Processed by: \_\_\_\_\_