



SPECIAL EVENT APPLICATION

91 ASHFIELD ROAD, ATHERTON, CA 94027
PH 650-752-0500 FAX 650-688-6528

\$75 nonrefundable fee

Note: Applications should be submitted a minimum of 60 days before the event to allow adequate time to process, should it be necessary to go to the planning commission.

Title of Event: _____

Date(s) of event: _____

Hours of the event: _____
(If different each day, please note)

Location(s) of the event in Atherton: _____

Type of Event: PROCESSION WALK-A-THON BIKE-A-THON HOUSE TOUR
OTHER _____

SPONSOR OF EVENT AND CONTACT PERSON:

Contact Person: _____

Phone Number: _____ **Fax Number:** _____

Email: _____

Name of organization: _____

Mailing address: _____

Contact person day of event (if different than above): _____

Phone Number: _____ **Fax Number:** _____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

Total number of participants and visitors expected per day: _____

Description of activities: _____

Parking plan (if applicable): _____

Type of advertising do you plan to do: _____

If this is a procession event, please attach route showing all locations in Atherton of sign postings, monitor locations, rest stops, etc.

Will there be a need for directional signs? yes no
If yes, attach a map with proposed locations.

Will there be a tent over 700 sq. ft installed? yes no
If yes, a Tent Permit is required and can be obtained with the Menlo Park Fire District.

Will there be a need for security or traffic control? yes no
If yes, attach a description of what is needed and how you propose to meet the need.

If the event is on public property, attach certificate of insurance and for the event in the amount of at least \$2,000,000 naming the Town of Atherton as additional insured.

Will there be amplified music or voice? yes no
If yes, indicated when and where. The Town has strict restrictions on amplified sound. Please check the regulations to ensure that your event is in compliance.

Will there be a need for town services? yes no
(There may be extra charges for these services.)

Street barricades? yes no Police protection? yes no

Traffic control? yes no Other? yes no

Describe what you need and when: _____

On the basis of this application, your event may be approved by the building official, or it may require review by the Planning Commission. If it is eligible for staff approval, the cost for the application is \$75.00. Applications should be submitted a minimum of 60 days before the event to allow adequate time to process, should it be necessary to go to the planning commission.

On behalf of _____, I guarantee that we will conduct this event in accordance with the laws of the town of Atherton. I certify that I have received and read ordinance 499 regulating special events, which covers the basic laws and rules that apply to special events within the Town of Atherton.

Signature: _____ Date: _____

FOR STAFF REVIEW ONLY:

DATE APPLICATION RECEIVED: _____

APPLICATION RECEIVED BY: _____

ATTACHED FEE: \$75.00 PAID: _____YES _____NO

EVIDENCE OF INSURANCE /HOLD HARMLESS AGREEMENT ATTACHED _____YES _____NO

DEPOSIT FOR TOWN SERVICES RECEIVED (IF APPLICABLE)? _____

APPROVAL:

POLICE REVIEWED: _____

PUBLIC WORKS REVIEWED: _____

BUILDING DEPARTMENT REVIEWED: _____

PLANNING DEPT. REVIEW: _____

MENLO PARK FIRE DISTRICT: _____

SPECIAL CONDITIONS OF APPROVAL: _____

DATE APPLICATION APPROVED: _____ BY: _____

CITY MANAGER

DISTRIBUTION OF COMPLETED FORM: 1) ADMINISTRATION OFFICE, 2) APPROVAL 3) PROOF OF INSURANCE AND DEPOSIT CHECK
4) SEND APPROVAL LETTER TO APPLICANT

AGREEMENT AND RELEASE FROM LIABILITY

Voluntary Participation

1. I, _____ [name of releasor] acknowledge that I have voluntarily applied to the Town of Atherton for a special event for non-profit organization. The event is a _____
_____ [describe event]
to be held on _____, _____, 20____ [date of event] in the Town of Atherton.

Assumption of Risk

2. **I AM AWARE THAT THE ACTIVITY DESCRIBED ABOVE IN WHICH I AM ENGAGING MAY INVOLVE SOME RISK OF INJURY TO ME OR TO MY PERSONAL PROPERTY. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY, DEATH, OR PROPERTY DAMAGE AND VERIFY THIS STATEMENT BY PLACING MY INITIALS HERE:**
_____.

Release

3. As consideration for being permitted by the Town of Atherton to participate in these activities and use their facilities, I hereby agree that I, my assignees, heirs, distributees, guardians, and legal representatives will not make a claim against or sue the Town of Atherton or any of its elected officials, employees, agents or attorneys for injury or damage resulting from the negligence or other acts, howsoever caused, by any elected official, employee, agent, attorney or contractor of the Town of Atherton as a result of my participation in the activity described above. I hereby release the Town of Atherton, its elected officials, employees, agents, attorneys or contractors from all actions, claims or demands that I, my assignees, heirs, distributees, guardians and legal representatives now have or may hereafter have for injury or damage resulting from my participation in the above described activity.

Knowing and Voluntary Execution

4. **I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE TOWN OF ATHERTON AND SIGN IT OF MY OWN FREE WILL.**

Executed at _____, California, on _____ [date].

RELEASOR

_____ [signature of releasor]

_____ [typed name]

Declaration of Witness

I certify that _____ [name of releasor] acknowledged in my presence that _____ [he or she] had read and fully understood the meaning and consequences of the foregoing release, and signed it in my presence.

Executed at _____, California, on _____ [date].

_____ [signature of witness]
_____ [typed name]
_____ [street address]
_____ [city, zip code]