

City of Brisbane

Agenda Report

To: Honorable Mayor and City Council
From: Noreen Leek, Recreation Manager
Subject: Application for Event Co-Sponsorship
Date: Meeting for May 18th, 2017

Recommendation:

Approve Silverspot Cooperative Nursery School Annual Pool Party Fundraiser as a co-sponsored event.

Background:

Silverspot Cooperative Nursery Preschool is a parent-run, non-profit co-operative nursery school working to create a community of encouragement and learning for families. The goal at Silverspot is to provide a safe, secure environment in which children learn through play to develop their social and language skills. Today the school serves over 40 families each year and is an active member of California Council of Parent Participation Nursery Schools. The school enrolls children between the ages of 2.5 years and 5 years 11 months.

This year, their Annual Pool Party Fundraiser will be held on Sunday, July 23rd. Silverspot is requesting the use of the Community Pool for this event. They kindly request continued support from the City for the compensated use of the Community Pool from 12:00-6:30 PM.


Fiscal Impact:

The Silverspot Pool Party Fundraiser qualifies under the Group II category for recreation facilities indoor use permits/pool private rental. Meeting the Group II requirements of being a resident non-profit with their event open to the general public qualifies them for free use of the facility and waives the deposit requirement. Since Silverspot collects the daily entrance fees for Recreational Swim as their fundraiser, pool revenue will be impacted from anywhere between \$300-\$1,000 for the day.

Attachments:

A. Cosponsorship Application


Noreen Leek
Recreation Manager


Clay Holstine
City Manager

CO-SPONSORSHIP EVENT APPLICATION

CITY OF BRISBANE, 50 Park Place, Brisbane, CA 94005
415 - 657-4320

1. ORGANIZATION INFORMATION

Organization: Silverspot
Coop Nursery School
Contact Person: Christine Hansell
Day Phone: 310-266-4673
Evening Phone: _____
Address: 4 Solano St
City of Residence: Brisbane
Zip: 94005

2. FACILITY

Facility Requested: Community Pool
If Mission Blue Center, specify room (s)
Costanos Room (Dance Floor) _____
Buckeye Room (Carpeted Room): _____
Lupine Room (Conference Room): _____
Date and Time Requesting to Enter Facility: 12 PM
July 23rd, ~~July 23rd~~
Date and Time Requesting to Leave Facility:
July 23rd, 6:30 PM

3. Event Information

Date: July 23rd Day of Week: Sunday # of Co-sponsored events this year 1
Starting Time of Event: 1 PM Ending Time of Event: 6 PM
 Non Profit for Charity For Profit Fundraiser for Organization Use
Number attending under 18 years old: 40 18 - 20 years: _____ 21+ years: 60
 Requesting Promotional Support

What is purpose of event: Annual Pool Party fundraiser for
Silverspot Coop Nursery School. Families from
the school are organizing the event to raise
money for educational programs. This event will be
open to the public.

Will you need special sitting, tables, chairs, risers, etc. Yes or No (please circle) Please explain if yes. Available
tables for food & drink area, table &
chair to take money and manage
activities

Will event require sound equipment? _____ Sound Technician? NA

Will event require theatrical lighting equipment? NA Lighting Technician? NA

Will event require promotional support? Yes No If Yes, what is requested? _____

Billboard sign posting and web posting
on website & social media sites.

5. **ALCOHOLIC BEVERAGES***

Will alcoholic beverages be served? Yes No Sold? Yes No

If selling alcohol, your group must obtain an Alcoholic Beverage Permit.

Please attach a copy of the permit.

ABC permits may be obtained from:

The State of California Alcoholic Beverage Control Department
185 Berry Street
San Francisco, CA 94107
415 / 557 - 3660

*Full Liquor Liability: If liquor, beer or wine is available for consumption and money is transacted in any form (i.e. for donation, for a ticket, for a meal, for entry to the event, for the beverage) then full liquor liability premiums are necessary.

6. **ADMISSION FEES AND SALES***

Will there be an admission fee or booth fee?: Yes No Amount of Fee: _____

Will there be sales of novelties or goods?: Yes No

Will there be sales of food?: Yes No

(If yes, a Permit To Operate is required by the California Health and Safety Code. Applications can be obtained from the Brisbane Parks & Recreation Department 415 / 467-6330)

Does your group have a City of Brisbane License?: Yes No

* Additional insurance is required for exhibitors, non-food sales concessionaires and food sales concessionaires.

I have read and understand the Policy and Procedures for Event Sponsorship and hereby agree to comply with its content. I understand that failure to observe these regulations or City, State or Federal law will result in cancellation of my event and co-sponsorship status for future events.

Applicant's Signature 

Date 5/2/17

OFFICE USE ONLY

Received By: N. Jeck
Date: 5/2/17

Date Appl'n Approved: _____

Title: _____

Copies: _____

Custodian - Date: _____

Police - Date: _____

Fire - Date: _____

Is any group being displaced? _____

If so, which group? _____

of Co-sponsored events this calendar year? 2

Promotional Support? Yes No Waived

Additional Lighting: Yes No Waived

Lighting Technician: Yes No Waived

Additional Sound: Yes No Waived

Sound Technician: Yes No Waived

Facility Use Charge -
80/20 Split Yes Waived

Other fee? Yes Waived

Charge for Staffing cost for extended use of facility Yes Waived

Deposit: Amount: \$ _____

Yes Date Paid: _____ Waived

Ck # / M.O. # / Cash: _____

Event Insurance: By City By Event Organizer

City: _____ Cert #: _____

Date Issued: _____

Amount: \$ _____

Date Paid: _____

Ck#/M.O.#/Cash: _____

If selling alcohol additional insurance purchased?

By City By Event Organizer

Alcoholic Beverage Permit obtained?

Yes # _____ No _____

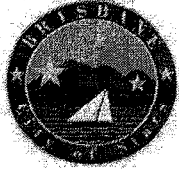
Business License

Yes # _____ No _____

County Health Permit:

Yes # _____ No

BRISBANE COMMUNITY POOL RENTAL FORM



BRISBANE COMMUNITY POOL
2 Solano St., Brisbane, CA 94005
Phone Number: (415) 657-4321
Fax Number: (415) 467-4989
www.brisbaneca.org

1) RESERVATION REQUEST

Application Date: _____

Contact Person: Christine Hansell

Organization (if applicable): Silverspot Coop Nursery School

Day Phone: 310-266-4673 Evening Phone: _____

Address: 4 Solano St, Brisbane CA 94005

Email: cshansell@gmail.com

2) EVENT

Date: July 23rd Day of the Week: Sunday

Starting Time: (include time for set up) 12 pm

Ending Time: (include time for clean up) 6:30 pm

Number Attending: 40 (under 18) 60 (18+)

3) EVENT DESCRIPTION- Please describe your event, be specific. (Birthday party, Swim Meet, Corporate, etc)

Annual Pool party fundraiser for Silverspot
Coop Nursery School.

4) SIGNATURE

I have read and understand the Brisbane Community Pool Birthday & Private Rental Policies as well as the pool rules. I understand that failure to observe these regulations or City, State or Federal law will result in cancellation of my event and forfeiture of all fees paid for the event.

[Signature]
Applicant's Signature

5/2/2017
Date

OFFICE USE ONLY

Received by: _____ Date: _____ Fees: \$ _____ Date Paid: _____

Cash // Check _____ Check # _____