



2012 VALMONT BIKE PARK

PROGRAM USE GUIDE

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DRAFT I

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Section 1 – GENERAL INFORMATION

This Program Use Guide is specific to Valmont Bike Park located at 3160 Airport Rd., Boulder, CO 80301. Valmont Bike Park is managed and maintained by the City of Boulder Parks and Recreation Department and all program use and event fees help to offset bike park operations and maintenance costs. The following information has been developed to guide you through the program permit process.

As you read through these guidelines and complete the program application, please be aware that this Use Guide was developed to address a wide variety of programs. Your specific application and supporting documents will respond to and include information and elements that relate to your program request.

Welcome to Valmont Bike Park

Valmont Bike Park (VBP) is a 42 acre natural-surface cycling facility with a “skill progression” design that serves all ages, abilities and riding styles. This design allows riders to improve their riding skills as they work their way up to advanced-level single track, slopestyle, dirt jumps and cyclo-cross elements throughout the park.

VBP offers miles of trails and dozens of features for several off-road cycling disciplines. This unique bike park was designed for day-to-day recreational use, program use and as a venue for races. By permitting program use, the park manager can balance all user areas and minimize the impact of the park, trails and parking lots.

Permit Use at Valmont Bike Park

- Birthdays parties and personal gatherings only need to complete the application form: APPENDIX A.
- Programs that charge a fee are required to permit according to the Boulder Revised Code 8-3-22

RESERVATION AND USE OF PARK AND RECREATION FACILITIES (BRC 8-3-22)

No person who offers a program of instruction and charges a fee for such a program, either directly or by way of a membership fee, shall use a city facility as part of such program without first obtaining a permit and paying any associated fee.

- Programs that do not charge a fee are required to permit to help the Park Manager balance the impact on trails, parking lots and with other permitted or public users or events.

As a program applicant it is your responsibility to clearly describe and document the proposed program in the application and supporting documents. Please include necessary items for clarification including the specific areas of use, all staff qualifications, program curriculum and any components to ensure the safety of all program participants, park guests and citizens.

Application Submittal Deadlines

Applications to be submitted no later than thirty (30) days prior to the actual date of your program.

Applications Must be Complete

It is the responsibility of the applicant to read and follow the requirements in this Program Use Guide BEFORE submitting an application. If you have any questions please email the Park Manager at valmontbikepark@bouldercolorado.gov for assistance.

Performance / Damage Deposit Required

A performance deposit may be required for applications based on the charts below. Deposits will be returned if all of the permit requirements are completed successfully, including, but not limited to, site clean up and payment of final invoice or damages. The specific deposit amount is determined by the program impact and may be subject to change after full review of the application.

Number of Participants	Deposit Amount
0-14	\$100 Minimum
15+	\$200 Minimum

Program Use Fees

The Chart below provides an example of typical Valmont Bike Park program fees. A final estimate of fees will be provided based on full review of the program application and any supporting documents.

VALMONT BIKE PARK 2012 Program Use Fees and Deposits (03/01/12)				
Group	Description	Permit Fee / Rate	Deposit	Insurance
Fee-Based Programs, Classes or Clinics at Valmont Bike Park	up to 2 hours and 14 participants or less	25% of program revenue or \$75 minimum	\$100.00 Minimum	Yes
	more than 2 hours or 15 or more participants	Fee Based on Program Application	Deposit based on Program Application	Yes
School, Team or Group use of Valmont Bike Park	up to 2 hours no more than 2X per mo 8 or less participants	No fee and Group provides a Volunteer Day**	None	None
	more than 2 hours more than 2X per mo up to 14 participants	min \$1.00 per rider and Group provides a Volunteer Day**	\$100.00 Minimum	Yes
	15 or more participants	Fee Based on Program Application	Deposit Based on Program Application	Yes
Personal Parties and Gatherings	up to 14 participants up to 3 hours Reserved picnic tables & up to two 10x10 tents	\$100.00 Minimum	\$100.00 Minimum	None
	15 or more participants or Business Parties / Events	Fee Based on Program Application	Deposit based on Program Application	Yes if Business or Event
Park Events	typically 15 or more participants with reserved use of bike park areas	Fee based on Event Application	Deposit based on Event Application	Yes
Platt Farm House Rental	up to 14 participants up to 3 hours	\$50 per hour - nonpeak \$100 per hour - April-Oct	\$100.00 Minimum	Yes if Business or Event
	15 or more participants or more than 3 hours or with reserved use of park	Fee based on Program Application	Deposit based on Program Application	

**Volunteer Day is scheduled with the Park Manager for a min 2 hour of park maintenance tasks performed by the group

Program Meeting with the Park Manager

A new applicants may be required to schedule a program meeting with Park Manager. The Park Manager assists programmers with planning, coordination and discussion of all needs or safety issues related to the onsite activity for a successful user experience.

Application Review Process

The Park Manager will notify the applicant upon receipt of the application and of any issues that arise during the review process or any request for additional items needed for the approval process. In most instances, approved event permits are issued thirty (20) days in advance of the program date.

Approved Use Permit

An approved program or use permit issued by the Park Manager is valid only for the location(s), route(s) and activities submitted in the application, site plan, route map and supporting documents and/or amendments made to the application during the review process. The Park Manager may place conditions or limitations for program location(s), route(s) and/or activities requested in the application.

The permit holder must have the permit onsite during the time of the approved program.

Failure to comply with the terms and conditions of the permit, additional requirements of City of Boulder, requirements established in the Program Use Guide or by the Park Manager may result in the immediate cancellation of the program, denial of future applications and/or the forfeiture of the deposit.

Event Cancellation

If the applicant cancels, postpones, delays or reschedules the proposed program date or any permitted elements, the Park Manager must be notified in advance by phone and by email.

If the Park Manager or designee cancels the program:

- Fees may be refunded to applicant and the City will make best efforts to reschedule event

If the applicant cancels:

- within 7 days of the event it results in forfeiture of 100% of the deposit and fees.
- within 8+ days from the event it results in forfeiture of 50% of the deposit and fees.

Valmont Bike Park Contact Information:

Park Manager
3198 Broadway
Boulder, CO 80304
303-413-7226

valmontbikepark@bouldercolorado.gov

Section 2 – Requirements

1. Application Form

An application form (APPENDIX A) must be completed and include all supporting documents with the performance deposit.

- Birthday parties and/or small personal gatherings need to only complete the Application form.
- Programs, Classes and Clinics must clearly describe and document the proposed program in the application and supporting documents. Please attach the necessary items for clarification including the specific areas of use, all staff qualifications, program operations and any components to ensure the safety of all program participants, park guests and citizens.

2. Insurance Certificate

An insurance Certificate for programs, classes and clinics must be included with the application. Required applicants must obtain public liability insurance in the amount of \$1,000,000 and provide a certificate of insurance naming the City of Boulder and its officers, employees, and authorized volunteers as additional insured as indicated on APPENDIX C.

3. Program Coordinator Info

A list of all names, emails and cell phone numbers of program coordinators assisting and on-site during the activity must be submitted with the application. Indicate all current certifications.

4. Program Operations Plan

The purpose of the Program Operations Plan is to outline specific actions and preparations for conducting a successful activity at Valmont Bike Park. Where the considerations do apply, the applicant must provide a very clear and concise explanation of the program and/or staff operations.

a. Define Program Date/Time/Time of Occurrence

The final permit is based on the dates and times submitted in the application. No set-up will be permitted before a permit is issued. Set-up must be initiated and clean-up must be completed by the times indicated on the permit. Insurance must cover program times including set up, and clean up.

b. Define Activity Areas and Use

The final permit issued by the Park Manager will only be valid for approved locations, routes and elements described in the submitted application and activity map. The activity route map is a visual description of all moving routes or activity paths of the program within the park. All tents and canopies locations must be approved by the Park Manager to prevent structures from interfering with irrigation lines, emergency access and public right of ways.

- Areas Maps of Valmont Bike Park may be downloaded at www.valmontbikepark.org
- Indicate all areas of the park to be used by the proposed program including specific trails and features, picnic areas and parking lots.
- Indicate any tent locations (with sizes) on the site map including, set-up and take-down times.

c. Define Medical Plan

All programs must have a medical plan in place that describes staff response to all emergency or medical needs that may arise. Provisions and protocols for emergency or medical care, transport and communications is required. Depending on the size and nature of the program, on-site emergency medical assistance from AMR emergency services may be required.

n. Emergency Access

Accommodation for emergency response must be provided at all times. Valmont Bike Park has an existing Emergency Access Plan that should be adopted by the program. This plan is currently approved and on file with all Emergency Services and should be used to communicate with emergency response personnel, dispatch or 911 calls.

m. Program Parking

During peak times, the permitted program may be required to use the south parking lot located at 5325 Valmont Road for program parking, drop off or pick up. Programs during June, July and August that start or end from 9am til 5pm must direct staff and participants to use the south parking area.

j. Leave no Trace

All areas must be cleared of debris and trash by applicant within 2 hours of program conclusion, unless other arrangements have been made with the Park Manager in advance.

i. Signage

Use of any program signage, banners, flags or logo materials must be pre approved by submitting the request in the application and/or supporting documents.

q. Bike Park Pond and Ditches

Programs, participants and spectators may not use, access, swim, fish or contaminate the irrigation ditches or pond in the Bike Park in any manner. Any use by the program, participants or spectators will lead to \$200 fine per incident in addition to any necessary repairs.

r. Multi-Use Path

Organized events on or using the Multi-use path will be limited and must minimize the impact to this right of way. Safe use of the path will require approval, proper signage and must abide by rules of the right of way.

s. Inclement Weather Plan

The applicant must indicate the plan to delay, postpone, reschedule or cancel the program due to inclement weather conditions and/or provide or seek shelter for all participants.

t. Obey all Park Rules and Posted Guidelines

Program Staff and Programs shall agree to abide by these rules and enforce them with participants:

1. Agree to stay on designated trails.
2. Agree to mitigate on-trail conflict with the general public by breaking into smaller groups as needed (no more than 8 on trails and no more than 4 on the pump tracks and dirt jumps).
3. Agree to follow good trail etiquette including yielding to others and sharing the trails/features.
4. Agree to the Leave No Trace principles for all trails, parking lot and gathering areas.
5. Agree to abide by all Valmont Bike Park rules, terms and conditions.
6. No Glass in the park
7. No Animals allowed on trails, unleashed or unattended.

The program and participants must abide by these and all posted bike park guidelines or result in the immediate cancellation of the program, denial of future applications and/or the forfeiture of deposit.

Section 5 – Permit Forms and Appendices

Appendix A: Event Permit Application

Appendix B: Sample Insurance Certificate

CITY OF BOULDER PARKS AND RECREATION DEPARTMENT
VALMONT BIKE PARK
PARK USE PERMIT APPLICATION



Applications can be submitted:

- Delivered or mailed to 3198 Broadway, Boulder, CO 80304
- E-mailed to valmontbikepark@bouldercolorado.gov

Payment can be submitted:

- By check payable to: City of Boulder and delivered with this form
- By credit card payment via phone once the form is delivered

NAME OF PROGRAM: _____

PROPOSED DAY(s): _____

DESCRIPTION: Birthday/Gathering___ Program/Clinic___ Other_____

Programs must complete and attach an operations plan with completed application as defined in the Program Use Guide

SET UP Date(s) _____ Time Start:_____ Time End:_____

PROGRAM Date(s) _____ Time Start:_____ Time End:_____

TAKE DOWN Date(s) _____ Time Start:_____ Time End:_____

Name of Applicant/Program Manager: _____

Address: _____ City _____ Zip _____

Telephone: (day) _____ (cell) _____

E-mail address _____

Need for Parking: Yes ___ No ___ Need for Electricity: Yes ___ No ___ Water? Yes ___ No ___

Will alcohol be dispensed or sold to the public? Yes ___ No___ Food? Yes ___ No___

Indicate all Park use areas:

Please describe any special conditions or needs:

A performance deposit is required for all applications based on the size and impact to the park. The specific deposit amount may be subject to change after full review of the application.

- _____ \$100 14 or fewer participants
- _____ \$200 15 or more participants

Conditions of Use:

Applicant agrees to the following conditions for an approved permit and the use of the facility:

1. Raising funds, charging admission or collecting money must have prior authorization.
2. No dogs are allowed on the trails, off lease or unattended.
3. No glass containers are allowed at the bike park or in any of the city parks.
4. No inflatables (bouncy houses, etc) are allowed on City of Boulder property. All tents and locations for setup must be pre approved by the park manager.
5. Facilities must be left in a clean and orderly condition. Lessee will be required to pay for all damage, loss and cost of excessive clean up. Security deposit will be returned if all of the permit requirements are completed successfully.
6. Parks and facilities are patrolled by local law enforcement agencies. All applicable rules and regulations including State Statutes and City ordinances will be enforced.
7. For programs or events where the participants pay a fee to lessee, lessee must provide the City with a certificate of insurance showing that the applicant has a comprehensive general liability policy for \$1,000,000 and that the City of Boulder and its employees, officers, and authorized volunteers are endorsed on such certificates as additional insured.
8. During the time the bike park areas are being used by the Lessee, the Lessee is responsible for all accidents, injuries, damages, or loss of property. City of Boulder and its designated representatives shall be held harmless from any and all claims resulting from the use by the Lessee.
9. Alcoholic beverages are allowed by permit only and can be obtained by calling 303-413-7200 a minimum of 3 weeks in advance.
10. The Boulder Parks and Recreation Department facilities, services and programs shall be rented and provided to groups that comply with the guidelines and provisions of The American's With Disabilities Act, that govern their businesses and operations, such as those provisions provided under Titles I, II, III, IV and V of the Act.
11. Additionally, the Boulder Parks and Recreation Department facilities shall not be rented to groups who discriminate on the basis of disability, race, color, religion, national origin, pregnancy, age, military status, gender, gender identity, gender variance, or sexual orientation.
12. The Lessee may not sell or authorize the sale of food or concession items without the written approval of the Parks and Recreation Department, the Boulder Health Department, and the contracted concessionaire.
13. The contract will not be considered final until a signed copy of the contract has been received by the Parks and Recreation Department.

Cancellation Policy: All fees and deposits are due within 1 week of the program start.

If the Park Manager or designee cancels the program:

Fees may be refunded to applicant and the City will make best efforts to reschedule the program.

If the applicant cancels:

within 7 days of the event it results in forfeiture of 100% of the deposit and fees.

within 8+ days from the event it results in forfeiture of 50% of the deposit and fees.

That I, my heirs, executors and assigns indemnify and hold harmless the City of Boulder for any claims, amounts, and/or damages that may arise during the rental process. That I release the City of Boulder and all of its agents from all liability for any injury which might be inflicted on third persons or property during the rental period. I have read and understand the rules/regulations above.

Applicant signature _____

Date: _____

Print Name: _____

Title: _____

Received by: _____

Date: _____

SAMPLE INSURANCE CERTIFICATE

 CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 01/01/2009
PRODUCER (000) 000-0000 FAX (000) 000-0000 #1 Name of Insurance Brokerage or Agency Street Address City, State Zip Code	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED #2 Insured Name Street Address City, State Zip Code	INSURERS AFFORDING COVERAGE #3	NAIC #
	INSURER A: Insurance Carrier Name INSURER B: Insurance Carrier Name INSURER C: Insurance Carrier Name INSURER D: Insurance Carrier Name INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
#4	A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	POLICY NUMBER	MM/DD/YYYY	MM/DD/YYYY	EACH OCCURRENCE \$ 1,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPOP AGG \$ 2,000,000
B		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	POLICY NUMBER	MM/DD/YYYY	MM/DD/YYYY	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
						BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
C		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO	POLICY NUMBER	MM/DD/YYYY	MM/DD/YYYY	AUTO ONLY - EA ACCIDENT \$
						OTHER THAN EA ACC \$
						AGG \$
D		EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$	POLICY NUMBER	MM/DD/YYYY	MM/DD/YYYY	EACH OCCURRENCE \$ 1,000,000
						AGGREGATE \$ 1,000,000
D		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under SPECIAL PROVISIONS below	POLICY NUMBER	MM/DD/YYYY	MM/DD/YYYY	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER
						E.L. EACH ACCIDENT \$ 100,000
						E.L. DISEASE - EA EMPLOYEE \$ 100,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000
OTHER						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS #6

The City of Boulder is named as Additional Insured as respects General Liability and Automobile Liability as required by their written contract with the Named Insured regarding Project/ Agreement No. _____ and/or Project Name: _____.

A Waiver of Subrogation in favor of the City of Boulder applies to Workers Compensation as required by their written contract.

CERTIFICATE HOLDER #7 City of Boulder Department of Risk Management 1777 Broadway Boulder, CO 80306	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>XX</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE #9
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Arthur J. Gallagher Risk Management Services, Inc.

Certificate Of Insurance Explanation of Sections

1. The name and address of the insured's insurance brokerage or agency appears here.
2. The insured's name and address appears here. The insured is the entity you are requesting the certificate from.
3. The names of each insurance carrier appear here – each are assigned a letter code: A, B, C, D and E to correspond with section #4.
4. The letter (A, B, C, D, E) of the appropriate carrier appears here for each coverage section.
5. An "X" will be marked in this box if additional insured status is being provided for the particular coverage section. Also see section #6.
6. The additional insured status and/or other contract or agreement requirements would appear in this section along with the project name and description.
7. The certificate holder's name and address will appear here. The certificate holder is the entity requiring the insured to provide the certificate of insurance.
8. The number of days that the insurance carrier will endeavor to mail notice of cancellation for the referenced policies appears here.
9. The signature of the authorized representative of the insured's insurance brokerage or agency appears here.

*Prepared by Arthur J. Gallagher Risk Management Services, Inc. – Denver 2/9/09

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