

MEETING ROOM RENTAL REQUEST FORM

I, \_\_\_\_\_ of unit # \_\_\_\_\_ in building # \_\_\_\_\_ hereby request to use the Meeting room/Patio area for a use fee of \$25.00 and a deposit of \$150.00 on (DATE) \_\_\_\_\_ from (TIME) \_\_\_\_\_ to \_\_\_\_\_ for the purpose of:

\_\_\_\_\_ .

I WILL / WILL NOT collect fees for admission and/or for food or beverages, and, if I will, it is for the purpose of

\_\_\_\_\_ .

There WILL / WILL NOT be more than twelve (12) guests under age eighteen (18); if so, the separate chaperon will be:

(NAME) \_\_\_\_\_ (AGE) \_\_\_\_\_ .

I agree to abide by all the rules established for the use of the meeting room/patio and to hold harmless Colecroft Station Condominium Unit Owners Association, their employees, and the management agent of any and all responsibility and liability relating to my use of the meeting room/patio. I further agree to accept full responsibility for any and all actions by participants resulting from the use of the meeting room/patio, and to accept full responsibility for control of the meeting room/patio until the function is concluded and/or the key is returned to the on Site Association Manager.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

I also acknowledge that I have received and read the rules in Policy Resolution No. 11 pertaining to the use of the meeting room/patio before I submitted this request and that I did not have any further questions about those rules at the time I submitted this request.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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APPROVED / DISAPPROVED (brief reason, by and date):

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