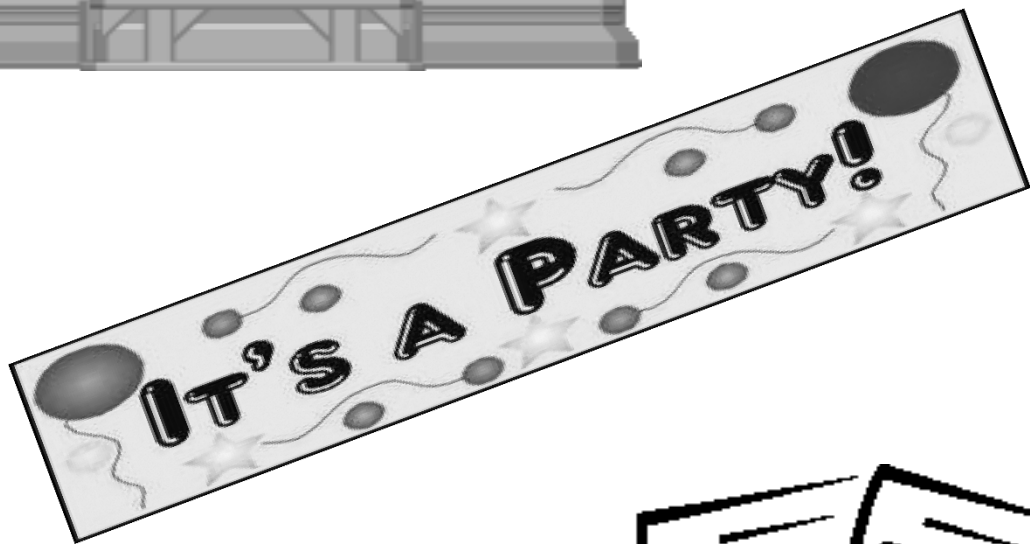


# Social Room Rental Agreement





HOMEOWNERS' ASSOCIATION, INC.

SOCIAL ROOM RENTAL AGREEMENT

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number: Home ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

Work ( ) \_\_\_\_\_ Email \_\_\_\_\_ @ \_\_\_\_\_

Date Requested: \_\_\_\_\_ Type of Function: \_\_\_\_\_

Hours of Function: \_\_\_\_\_ Time of Set-Up: \_\_\_\_\_ # Of People Expected: \_\_\_\_\_

Will Food Be Served: Yes ( ) No ( ) Catered: Yes ( ) No ( )

By Company: \_\_\_\_\_

Will Any Props or Activities Be Brought In? Yes ( ) No ( ) If Yes, Please Describe:

\_\_\_\_\_

NOTE: all equipment, trash, refuse and party decorations must be removed promptly upon conclusion of the event/function. It is renter's responsibility to remove trash and refuse, as there is no trash pickup at the clubhouse.

\*\*You will be contacted 2-days prior to the event/function by the social committee member conducting the clubhouse inspection to set up a time to inspect and receive a key to the social room door\*\*

Party Reservation Approved By: (Authorized Signature)

Name \_\_\_\_\_ Title \_\_\_\_\_

Catering/Props/Activities Company Information:

Copy of Business License Received \_\_\_\_\_ Copy of Insurance Received \_\_\_\_\_

Money Received:

1) Rental Fee Received \$ \_\_\_\_\_ Check # \_\_\_\_\_ Rec. By \_\_\_\_\_

Please Make Certified Check Payable to Coral Trace HOA

2) Security Deposit Received \$ \_\_\_\_\_ Check # \_\_\_\_\_ Rec. By \_\_\_\_\_

Total Received: \$ \_\_\_\_\_

Security Deposit Returned \$ \_\_\_\_\_ Check # \_\_\_\_\_ By \_\_\_\_\_

Date Returned \_\_\_\_\_ Renter Signature \_\_\_\_\_

\*\*RESERVATIONS MUST BE SECURED A MINIMUM OF TWO WEEKS IN ADVANCE\*\*



## **SOCIAL ROOM RULES FOR EVENTS/FUNCTIONS**

### **SMOKING IS NOT PERMITTED AT ANY TIME IN THE CLUBHOUSE**

**Renters must adhere to all CORAL TRACE RULES, REGULATIONS and GOVERNING DOCUMENTS for use of the CLUBHOUSE and surrounding areas.**

1. This rental is only for the use of the social room and restrooms. All other rooms, as well as the pool & spa areas, are restricted from use.
2. Only Homeowners/Residents of Coral Trace are permitted to rent the Social Room and Facilities
- 3. HOURS FOR EVENTS/FUNCTIONS: 10 AM to 11:30 PM**
4. The Clubhouse Social Room must be vacated and cleaned by 10 AM the following day, or \$75 per day will be charged until cleaned and vacated.
5. Events/Functions – Limited to no more than Seventy-Five (75) people, by order of the City of Delray Beach Fire Marshall.
6. Homeowner/Resident is responsible for complete set-up and clean up. All materials brought in for the event/function must be removed immediately upon completion of the event/function. Homeowner/Resident is responsible for all equipment necessary for cleaning and replacing all furniture/equipment back in their normal positions.
7. Vehicles must not park in or block the streets and are not allowed to park on the grass.
8. The noise level must be kept to a minimum. No amplified music will be allowed outside of the clubhouse or in pool area. All activity, after 9:00 PM, is restricted to inside the clubhouse as a courtesy to nearby homeowners.
9. Pets, bicycles, skateboards, rollerblading and motor powered vehicles are NOT permitted in the Clubhouse or Pool area.
10. The event/function DOES NOT PROHIBIT other homeowners from using the other areas or other amenities of the Clubhouse.

**Decorations MUST BE Applied with Non-Paint removing Tape (blue or green painter's tape).**

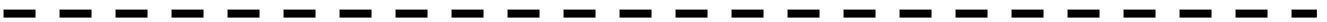
Reservations are on a first-come first-served basis. HOA/Management Company reserves the right to book only one (1) event/function per day to allow for set-up and cleanup.

To confirm or make reservations for the Social Room please see website for contact person.

A certified check or money order is required for the rental fee of \$150 for the first day, and \$75 for each successive day of the event (which are non-refundable); and a \$300 refundable Security Deposit is required and must be paid at the time of scheduling of the event/function. The deposit will be refunded in full within TEN (10) business days following the event if a HOA representative determines that there has been no wear-and-tear or other damage to the facilities following the event. If damage or undue wear-and-tear have occurred cleanup and repair fees will be taken out of the security deposit, and any balance returned to the renter.

If the reservation is cancelled two week days or less prior to the event, the Association reserves the right to charge a \$50 fee.

All **returned checks** will be the responsibility of the Homeowner/Resident. A \$25 fee will be charged.



HOA/MANAGEMENT COMPANY RESERVES THE RIGHT TO PERFORM ANY CLEANING AND REPAIRS REQUIRED TO RETURN THE CLUBHOUSE TO ITS PRIOR CONDITION. THESE COSTS WILL BE BORNE BY THE RENTER OF THE SOCIAL ROOM.

**A refund is based on all inventoried items set forth on inspection delivered in substantially same condition as prior to event, and the Clubhouse returned in the same/better condition as was delivered and agreed upon (See Checklist).**

**A Pre/Post event inspection will be completed before set-up and after event completion.**

CORAL TRACE SOCIAL ROOM RENTAL  
WAIVER OF LIABILITY AND INDEMNIFICATION AGREEMENT

IN CONSIDERATION OF MY RIGHT TO EXCLUSIVE USE OF THE SOCIAL ROOM FOR MY CLUBHOUSE EVENT, THE UNDERSIGNED HEREBY AGREES THAT ANY AND ALL LIABILITY CAUSED BY OR ARISING FROM ANY ACTS OCCURRING AT THE CLUBHOUSE ON ACCOUNT OF THIS EVENT WHICH MAY INCREASE THE SUSCEPTIBILITY TO LOSS AND/OR CAUSE ACTUAL DAMAGE OR LOSS ON THE DESCRIBED PREMISES SHALL NOT BE HELD AGAINST THE ASSOCIATION AND INDEMNIFY THE ASSOCIATION FOR ALL LOSSES, EXPENSES AND ATTORNEY'S FEES IN CONNECTION WITH THE RENTING OF THE CORAL TRACE CLUBHOUSE.

**I have read the above and agree to abide by all Rules and Regulations. I further agree that any and all damages not indicated on the attached checklist will be my full responsibility and I agree to reimburse, indemnify and hold harmless the HOA for the full cost of restoration, upon demand made upon me by the HOA.**

\_\_\_\_\_  
HOMEOWNER/RESIDENT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
HOMEOWNER/RESIDENT

\_\_\_\_\_  
DATE

\_\_\_\_\_

\_\_\_\_\_

WITNESS: HOA REPRESENTATIVE

DATE

*Fill out and Return to HOA*



**SOCIAL ROOM EVENT/FUNCTION  
EQUIPMENT AND FURNITURE CHECKLIST  
(To Be Completed Prior To And After the Event/Function)**

**CONDITION NOTED:** **PRIOR** **AFTER**

<b>SOCIAL ROOM</b>		
Upholstered Couch, Loveseat & 2 Chairs		
Coffee Table/End Tables		
TV/DVD & TV Remote		
Walls		
4 Round Tables, 16 Chairs, and 4 Bar Stools		
1 Telephone		
<b>Kitchen Area:</b> Floor, Countertops, Microwave, Refrigerator, and Dishwasher		
<b>Closets:</b>		
<b>Right Closet:</b> 31 white Chairs, 1 White Cooler, 3 Wire and 1 Stainless Chafing Dish, 2 6-foot White Tables, 2 8-foot Tables, and 1 Black Card Table		
<b>Left Closet:</b> 37 white Chairs, 6 folding chairs, and 6 black Chairs		
<b>Entrance Area Corridor</b>		
Tile, walls		
<b>Restrooms</b>		
Floors, walls, equipment		
<b>Note any additional items:</b>		

I, \_\_\_\_\_, do hereby agree with the conditions listed above.  
(Homeowner/Resident – Print Name)

**Prior to Event/Function**

**After Event/Function**

\_\_\_\_\_ Homeowner/Resident \_\_\_\_\_  
\_\_\_\_\_ Date \_\_\_\_\_

**HOA Representative Signature**