



**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\*\***