STRADA 315 CONDOMINIUM ASSOCIATION, INC

REQUEST FOR AMENITY ROOM RESERVATION

Name:	
Owner: Renter:	Unit:
Contact Information: Telephone #:	
Email Address;	
I am requesting approval for a reservation of the Amenity Roo	m for the following function:
	: The function will take place on
	: 20 Fromam/pm to
And will be attended by expected guest Management Office 48 hours in advance. (maximum room ca	
l expect the arrival of cars. I will contact the parking at my own cost (If greater than 10 cars)	e Management Office to arrange for valet
Scheduled time & date for walk-thru Prior to event:	(am) (pm) 20
Scheduled time & date for walk-thru after event:	(am) (pm)20
I acknowledge, understand and agree, that a cleaning fee of deposit of \$500.00 dollars (\$) must be receive ASSOCIATION Management Office with this request for reservent seven days (one week) in advance.	d by the STRADA 315 CONDOMINIUM
I will conduct a walk through with a Strada 315 Management to review the condition of the Social Room. I understand tha caused by myself or persons attending the event, could increa	t certain circumstances, including damage

I acknowledge, understand and agree that disturbing noise levels will not be allowed, that decorations requiring attachment to walls will not be allowed, including thumb tacks, staples, etc. and the gathering must conclude at 12:00am. The attendees will remain in the designated reserved function room and at no time will the function or guest be allowed on the pool deck. I acknowledge, understand and agree that I am responsible for Amenity Room cleanliness including the access areas and for disposing all garbage in appropriate refuse containers. I agree that the facility will be cleaned and brought back to the

condition immediately after the conclusion of the event. Events may be catered, but cooking of food or food warmers are strictly prohibited.

I acknowledge, understand and agree that I will abide by the rules and regulations for the use of the Amenity Room and access areas requested above. Failure to comply with the above acknowledgements, understanding, agreements and other related condominium rules and regulations, will result in the forfeiture of my Five Hundred (\$500.00) security deposit and that I will reimburse STRADA 315 CONDOMINIUM ASSOCIATION, for repairs of such damage in excess of the Five Hundred Dollars (\$500.00) security deposit. I further agree that such excess damage may be invoiced through my security or assessment account with all collection privileges currently in place for this account.

Resident's Signature	Date		
Management Representative	Date		
THE DOOM CANDIOT DE HIEFD HALTH WALK			
THE ROOM CANNOT BE USED UNTIL WALK-	THROUGH HAS BEEN PERFORMED BEFORE THE E	VENT	

EVENT