

9th FLOOR CLUB LOUNGE RESERVATION FORM

Date of Application: _____ Unit Number: _____

Unit Owner/Resident Name: _____

(Please Print)

Date of Reservation: _____ Time of Reservation: _____ to _____ # of Guests: _____ *

A refundable security deposit of \$1000 & a non-refundable clean up fee of \$250 is required at the time the reservation is made.

The Club Room will be inspected by Management along with the resident making the reservation before and after the event, during normal business hours. In the event any damage exceeds the amount of the deposit, the Unit Owner/Resident will be fully responsible for all charges. The Club Room is required to be left in the same condition as prior to the event. All room cleaning (carpets, counters, etc.) is the responsibility of the Unit Owner/Resident who signed for the room reservation.

Note: A Guest List must be provided to the Management Office no later than 24 hours prior to the event

- ❖ ***Extra valet** is required for group events where 6 or more people are planned to be in attendance. Arrangements can be arranged by contacting our valet vendor directly by email at: Tim@eastcoastvalet.com or by phone at: 561.662.7495
- ❖ ***Extra security** is required for group events where 25 people or more are planned to be in attendance. Arrangements can be made by contacting our Security vendor directly by email at: Warris@MarksmanSecurity.com or by phone at: 954.964.6704
 - Once the required valet and/or security arrangements are confirmed (recommended no later than 3 days prior to the event date) a confirmation email should be sent to Donna.Sanders@FSResidential.com
 - Event reservations are on a first come first serve basis
 - Reservations are not able to be confirmed until all required paperwork, fees and extra staffing (as necessary) is confirmed and on file with the Management Office.

Residents reserving the Club Lounge for private events must be present (in attendance) during the entire event reservation time frame.

**Association sponsored events have priority scheduling over any private event by a Unit Owner/ Resident
NO RESERVATIONS/EXCLUSIVE USE ON HOLIDAYS.**

MANAGEMENT/ADMINISTRATIVE USE ONLY

Date Deposit Received: _____ Check Number: _____ Date Deposit Returned: _____

*Confirmation of extra staffing received (if required): Valet _____ Security _____

Damages Any): _____

I fully agree to all of the terms as set forth above: _____

(Resident Signature)

Approved by: _____ Date: _____