## FOREST LAKES COMMUNITY CENTER USAGE REQUEST

Today's da	ate	Date of Requested Use:			_
Hours of u	iseAM/PM until	AM/PM	Allowat	ole hours: 8:00AM-7:00 PM	
Check the	facilities that you plan to use:	the "Q" Bldg	the FLOA House	Outdoor property	
Requester'	's Name/Group				
Address			Phone		
	Community Groups scheduling	meetings or Community	Service Events will no	ot be charged rent for use of the f	<sup>f</sup> acilities.
Communit	ty Groups whose members are a	lso members of FLOA w	ill not be required to	provide additional liability insura	ance.
	rties and events will be charged er cleanup and inspection. They			s are unlocked for set-up and end of Liability Insurance.	ling when door is
	ative that the renters of the Comwith proof. Normally, a Homeo		secure their own insu	urance rance and provide a <u>Certificate o</u>	f Liability
of websites	s that are very helpful are www.	.EventHelper.com or ww	w.specialeventinsura	uoted and purchased on line very ince.com. of the event is the first recourse i	
Refund wi		a two hundred dollar (\$20 least 24 hours in advance	of the event. OR R	ON mage deposit at the time the reser efund will be made if Center is le L DEPOSIT \$	
	eposit should be made out to: cass it on to the FLOA Treasure		VNERS ASSOCIAT	<b>ION</b> and given to the Event	's Coordinator,
and other e and lock up Resident o		I trash is to be taken to the nunity Center during the r	e FLCC dumpster. Treservation time.	set-up AND take down of any an This will be done PRIOR TO the tem:  (initial)	
in circums	ester reserving the Community Contacts where the damage incurrents to the Event Contact to th	ed exceeds the "damage	Deposit" to repair or	while the Community Center is ureplace.	ınder his or her us
attendees, during use Signature I	releases FLOA and its Governing of these facilities and agrees to below acknowledges that the au	pplication in consideration ng Board, members, office indemnify and hold harm thorized representative of	ials, employees, and alless said parties from the group requesting	ssion to use the FLCC for him/he agents from all claims and liabili	ity arising from or
this form in	ncluding, but not limited to, the	hold harmless agreemen	t.		
Signature_	Forest Lakes Resident		Date		
Signature_	Authorized Representative of F	FLOA	Date		

Community Center contact: Judy Summers, Events Coordinator Approved: 16 May 2015 480-235-8801, jsummers43@earthlink.net 4th Revision: 24April2017