## FOREST LAKES COMMUNITY CENTER

			E REQU	EST	ILK	
Today's date		Date of Requested Use:			-	
Hours of use	AM/PM until	AM/PM		Allowable hours: 8:00	0AM-7:00 PM	
Check the facilitie	s that you plan to use: "	Q" Bldg FLOA	A House	Outdoor property	Garage	
Requester's Name	/Group					-
Address			Phone			
Commu	nity Groups scheduling n	neetings or Community	Service Eve	nts will not be charged	d rent for use of the	facilities.
Community Group	os whose members are als	so members of FLOA s	<b>shall</b> <u>not</u> be	required to provide ad	ditional liability insu	irance.
	l events will be charged a up and inspection. They w					ding when door is
	the renters of the Comm f. Normally, a Homeown		secure their	•	ovide a Certificate o	f Liability
FLOA shall be identif	ied as secondary insured	organization on the C	Certificate of	Insurance liability form	m submitted by the	requestor.
A couple of websites	vent" policies available o that are very helpful are e required? It protects th	www.EventHelper.co	or <u>www.</u>	specialeventinsurance	e.com.	
Refund will be ma	will be required to pay a de <b>IF</b> cancellation is at lead level of cleanliness as	east 24 hours in advance	ce of the eve	nt. OR Refund will be	made if Center is le	
	hould be made out to: to the FLOA Treasurer.		WNERS AS	SOCIATION an	d given to the Event's	s Coordinator,
and other equipme lock up of the faci Resident of record	ng and using the Forest I nt that will be used. All t lity. MUST be at the Commu l and understands the FL	rash is to be taken to th unity Center during the	he FLCC du	mpster. This will be do	one PRIOR TO the f	final inspection and
use in circumstanc	erving the Community Correspondence of the community correspondence of the community community of the community community community of the community c	urred exceeds the "dan	nage Deposi	t" to repair or replace.	·	under his or her
attendees, releases	resident executing this ap FLOA and its Governing e facilities and agrees to i	g Board, members, offi	ion of receiv icials, emplo	ing permission to use yees, and agents from	all claims and liabil	
	cknowledges that the auth ding, but not limited to, th			requesting use has rea	ad and agrees to abid	e by all terms
Signature	Lakes Resident		_ Date			
Forest	Lakes Resident					

Signature\_

Date \_

Authorized Representative of FLOA

Community Center contact: Shari Massion: Events Coordinator 480-201-4693 ssmassion45@gmail.com

Approved: 16 May 2015 5<sup>th</sup> Revision: Oct. 4, 2019