

**HARBOR OAKS HOMEOWNER ASSOCIATION  
MEETING ROOM EVENT REQUEST FORM**

Please complete then email, mail or fax back one (1) week prior to event date to the Harbor Oaks' Management Representative listed below:

**Harbor Oaks Homeowner's Association**  
1080 Saint Joseph St. 7G, Carolina Beach, NC 28428  
Phone: 910/636-3088

**Contact:** Shelley Steele – [shelley@harboroaksassociation.com](mailto:shelley@harboroaksassociation.com) (910-636-3088)

**UNIT NUMBER:** \_\_\_\_\_ **REQUEST DATE:** \_\_\_\_\_

**EVENT DATE:** \_\_\_\_\_

**NAME OF PERSON REQUESTING RESERVATION**

**NAME:** \_\_\_\_\_ **PHONE NUMBER:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **CELL NUMBER:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**EVENT DETAILS**

**ARRIVAL SET-UP TIME:** \_\_\_\_\_ **START TIME:** \_\_\_\_\_ **END TIME:** \_\_\_\_\_

**NUMBER OF ATTENDEES:** \_\_\_\_\_

**DESCRIPTION OF EVENT:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**SPECIAL REQUEST:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

By submitting this form, Unit Owner(s) or Tenant (if applicable) acknowledges that he/she has received and agree to abide by the **Harbor Oaks Rules and Regulations**. Meeting Room Reservations are on a first come / first serve basis. Pool and Grill area will remain open to residents during your event. **Meeting Room must be cleaned after event or a \$25.00 cleaning fee will be assessed.**

**NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(Print)

**SIGNATURE:** \_\_\_\_\_

**APPROVED** ☐ **NOT APPROVED** ☐

**SIGNATURE:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_