

Request for Use Form

(Applicant Name)	(Approx. No. ad	lults)	(Approx. No. children)
(Applicant/Organization	Mailing Address)		
(Provide brief descriptic	on of Event: i.e. – The Butler Fo	amily Super Bow	l Party)
Telephone (day)	Telephone (evening)		Email Address
Date and Time requested:(n	nm/dd/yyyy)		(time)
Preferred Four (4) Digit Secur	ity code:		
Check the box of the sp	pace you desire.		
	Community Room	Pavilion	
subject to the applicable fe clean up. If extra time is re	d in four (4) hour incremen ees. Each four (4) hour incr equired, an additional time E IS NON-REFUNDABLE.	ement INCLU period must b	DES your set up and be reserved at the rate
Fee Schedule:			
Resident Deposit Fee- \$	100.00		Each additional hour-

Non-refundable Room/Pavilion fee - \$50.00 (separate check or money order)

Applicant Guidelines

AS THE APPLICANT, I HAVE...

- 1. Read the below information about facility use and take responsibility for the actions of my group during our time of use.
 - Agreed that I take responsibility for any damages that occur because of misuse of the premises during our time of use.
 - Acknowledged photo identification must be presented with completed application and fees.

AS THE APPLICANT, I WILL...

- Be held personally responsible for obtaining the code and notifying Management when Event has concluded.
- Failure to notify Management will result in the forfeiture of your security deposit.
- Complete the Community Room Pre-Event Check List **prior** to my use and return with the notification which will help ensure the return of my security deposit.
- Return room and contents to order.
- Not permit smoking, alcohol or drug use on the premises. This includes both inside the building and outside.
- Turn off all interior lights upon departure.
- Not use anything that emits smoke or fog, including, but not limited to incense burners, fog machines or candles. Only acceptance shall be in the brief moment for a birthday cake celebration.
- Check that our door is locked from the outside upon departure.
- Leave behind no wrappers from food, food refuse, or trash that creates odors, nor any stains on the floor. Kitchen limited to refrigerator, microwave and sink only.
- Ensure loading or unloading of vehicles shall strictly be from the parking lot only. No vehicles are permitted on the pathway adjacent to the entrance.

AS THE APPLICANT, I UNDERSTAND...

- The room is reserved in four (4) hour increments. Each four (4) hour increment is subject to the applicable fees. Each four (4) hour increment INCLUDES set up and clean up. Extra time is available for an additional fee(s).
- The Stovetop/oven, dishwasher and miscellaneous kitchen items and supplies in the kitchen must be cleaned after use. If used the fireplace will be cleaned.
- Please refer to instructions on wall for temperature control.

Ashley Plantation Community Use Policy

Ashley Plantation HOA's Community Room is available to the residents of Ashley Plantation HOA for not-for-profit activities appropriate to its size and amenities. Examples of acceptable uses of the facilities include registration for community recreation programs, training lectures, community association meetings, social uses and other similar activities.

Written reservations are required to use the Community Room. The request application consists of 3 pages, all of which shall be completed in full by an adult (an individual age 21 or older) member of the organization seeking use of the Community Room and submitted to Ashley Plantation HOA with the appropriate fees:

Policy governing the use of the Community Room includes the following:

- 1. Profit-making enterprises, which benefit private parties or any one individual, may not occur during use of the Community Room.
- 2. It is the responsibility of the Use Group to be aware of and abide by occupancy limits governing the room or rooms utilized by the Use Group. This information is part of the "Community Room Request for Use Form."
- 3. It is the responsibility of the Use Group to be aware of and abide by adult-children ratio requirements governing the use of the room. This information is part of the "Liability/Waiver ReleaseForm."
- 4. The room may be reserved from 8 a.m. until 10 p.m. daily.
- 5. Reservations to use the room repeatedly for regularly occurring functions will be considered on a case-by-case basis and are subject to review quarterly.
- 6. Ashley Planation shall, in its sole discretion, approve or deny use applications.
- 7. Ashley Planation HOA reserves the right not to accommodate reservation requests submitted less than 5 working days in advance of the intended use date.
- 8. All reservation requests will be processed in the order in which they are received.
- Completion of the Liability/Waiver Release Form is a condition of use of the Community Room. No
 Use Group will be permitted to use the Community Room unless Ashley Planation HOA has received a
 signed Liability/Waiver Release Form.

Ashley Planation HOA reserves the right to terminate this arrangement or deny reservation dates at its discretion. Reasons can include The Association's need for the space or misuse of the premises by the organization. Organizations reserving the room may not create scheduling monopolies (i.e. continuously reserving the room for multiple nights per week for an extended period of time). The community room is designed for the entire community to reserve and utilize not just a select few groups or organizations. When scheduling conflicts occur, the Association will make every effort to notify the organization 24 hours in advance of the anticipated use, and the Association shall not be responsible for any inconvenience upon providing notice.

I have read and understand the information on the Community Room Use Policy (above).

Signature	Date
Print Name	Title
Organization	

Revised: 12/17

RESERVATION USE AND LIABILITY WAIVER

I do hereby agree, for myself, my heirs, executors, administrators, and assigns, to forever remise, release and discharge Ashley Planation HOA its directors, officers, members, agents, commissioners and any other representatives related to any and all Community Room activities, and their heirs, executors, administrators, and assigns from any and all actions, causes of action, suits, debts, accounts, controversies, damages, claims and demands, whatsoever, which I or my legal representative may have or acquire against Ashley Planation HOA, or its directors, officers, members, agents and any other representatives related to the Program, by reason of any loss resulting from personal injury or property damage, including but not limited to weather related events which may occur during, in connection with, or by reason of my use and attendance at the Ashley Planation HOA Community Room and related facilities.

I agree that Ashley Planation HOA shall have the right, at its discretion, to enforce rules of conduct and/or terminate my participation and/or use of the Ashley Planation HOA Community Room and related facilities for failure to act in conformance thereof, or for actions or conduct detrimental to or incompatible with the welfare, comfort, harmony or interest of the group or the Ashley Planation HOA property as a whole.

I hereby grant Ashley Planation HOA and any of the directors, commissioners, officers, members, agents and other representatives full authority to take whatever action, in their discretion, is determined to be necessary regarding my health, safety and welfare, and I fully release Ashley Plantation HOA and any of the directors, officers, members, agents and other representatives from any liability for such actions, as set forth herein.

(Signature of Applicant)

(Printed Name of Applicant)

(Date)

Note: Official Use Only

Approved by: _

Date:

COMMUNITY ROOM PRE-EVENT CHECK LIST

Prior to your use, please indicate if you found:

Trash/Food Left Behind:

□ Kitchen

 \Box Community Room

 \Box Men's restroom

 \Box Women's restroom

Comments

Floors/Tables/Countertops Not Cleaned:

□ Kitchen

	Community	Room
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 \Box Men's restroom

 \Box Women's restroom

Comments

Misuse of appliances (authorized and unauthorized)

Comments:_____

Misuse of unauthorized areas

□ Outside patio	
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□ Loading/unloading/parking on side entrance pathway

Comments:

□ Room left in good condition prior to our use

Signature:	Date:	
Date/time of your event:		

