

**PAVILION RESERVATION**

The purpose of this form is to request the use of the Pavilion for a private function. Submit the completed form to the property manager with a check payable to Dadeland Walk Association for the security deposit.

**EVENT DETAILS**

**Date of Event:** \_\_\_\_\_ **Start Time:** \_\_\_\_\_ AM/PM **End Time:** \_\_\_\_\_ AM/PM

**Type of Event:** \_\_\_\_\_

**Number of Guests:** \_\_\_\_\_ **Expected Cars:** \_\_\_\_\_

**Resident Host Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Cell #:** \_\_\_\_\_ | **Home #** \_\_\_\_\_

**Email:** \_\_\_\_\_

**CONDITIONS OF USE**

1. **Advance Notice:** Submit reservation form at least 7 business days before the event.
2. **Security Deposit:** A refundable security deposit is required to secure the reservation. Deposit may be forfeited for any rule violations, including early setup, exceeding hours, leaving the area unclean, or causing damage.
3. **Time Limit:** Reservation hours are from 10:00 a.m. to 11:00 p.m. Setup is not permitted before 10:00 a.m., and all cleanup must be completed by 11:00 p.m. sharp.
4. **Resident Host:** The resident host must remain on-site throughout the event.
5. **Cleanup Requirement:** Cleanup is required. Failure to return the pavilion to its original condition may result in loss of the deposit.
6. **Account Status:** The Lot Owner's account must be current with no outstanding balances for the reservation to be approved.
7. **Guest Limit:** Maximum 50 guests. Limited guest parking is available (no parking in front of other units or common areas).
8. **Music:** All music must be shut off by 11:00 p.m. sharp, in compliance with Miami-Dade noise ordinances.
9. **Security Camera:** The pavilion is monitored by 24/7 video surveillance. Entry constitutes consent to being recorded.
10. **Damages:** Residents are responsible for any damage. Costs exceeding the deposit may be charged to the Lot Owner.
11. **Full Rules:** Available at: [www.dadelandwalk.com](http://www.dadelandwalk.com)

**Resident Acknowledgment:**

I understand that submitting this form does not guarantee approval. I agree to follow all pavilion rules and conditions. I acknowledge that the full security deposit may be forfeited if any terms are violated, including early setup, failure to vacate on time, inadequate cleanup, damage, or disturbances. I further understand that my account must be in good standing with the Association for the reservation to be accepted.

Resident Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**For Association Use Only:**

☐ Approved Date: \_\_\_\_\_ ☐ Denied Date: \_\_\_\_\_ ☐ Cancelled: \_\_\_\_\_

Reason for Denial or Cancellation:

\_\_\_\_\_

Deposit Returned On: \_\_\_\_\_ By: \_\_\_\_\_