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## Clubhouse Rental Form

**NAME:** \_\_\_\_\_

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

**PHONE NUMBER:** (     ) \_\_\_\_\_ -- \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**DATE REQUESTED:** \_\_\_\_\_

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

**EVENT TIME: FROM** \_\_\_\_\_ **A.M. /P.M. TO** \_\_\_\_\_ **A.M. /P.M.**

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

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Please include separate checks for \$125 rental fee and \$500 for deposit to cover cleanup/damage. The \$500 check will be returned if no problems are found.

Facility may NOT be available for many dates.

**PLEASE MAKE CHECKS PAYABLE TO ELLICOTT MEADOWS CONDOMINIUM ASSOCIATION AND SEND TO TIDEWATER PROPERTY MANAGEMENT, 3706 CRONDALL LANE, SUITE 105, OWINGS MILLS, MD 21117.**

**IF THE EVENT IS APPROVED, YOU WILL BE NOTIFIED BY TELEPHONE.**

**I HAVE READ THE RENTAL RULES AND REGULATIONS AND AGREE TO ABIDE BY THEM. I UNDERSTAND THAT RENTAL DOES NOT ALLOW EXCLUSIVE USE OF FACILITIES.**

**Resident Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_