

VISTA CAY AT HARBOR SQUARE
4874 CAYVIEW AVE
ORLANDO, FL 32819
PHONE: 407-313-4460
FAX: 407-313-4462
EMAIL: info@accessyourcondo.com

APPLICATION FOR ROOM RESERVATION AGREEMENT

In consideration of Vista Cay at Harbor Square allowing me the exclusive use of the Flex Room and related equipment and furnishings, **I the undersigned, agree as follows:**

1. I agree to reserve the Flex Room at Vista Cay on _____ under the terms and conditions set forth below.

2. I am reserving the Flex Room for the purpose of _____, which will be attended by not more than 46 people.

3. The event will be held between the hours of _____ and _____ on the date noted above. **I understand that continued use of the Flex Room after the hours for which it has been reserved will constitute a breach of Agreement and will result in forfeiture of my deposit.**

4. I will make Deposit of \$50.00, which is due and payable upon submission of this Agreement. I understand that I also must pay \$100.00/hr with a minimum of two (2) hours for the Flex Room. The balance of \$50.00 will be returned when I have finished occupying the room and it is substantially the same condition as when I occupied the room. I further understand and agree that this deposit will be used to pay for cleaning cost and any and all damages to the Flex Room, its contents, or any other portion of the property occurring while I was in possession of the room. I understand that any charges made against my deposit will be explained. If the amount of charges exceeds the amount of my deposit, I agree to pay Vista Cay the full cost of all repairs within ten (10) days of receipt of a written explanation of the damages and a bill from Vista Cay for such repairs.

5. I assume all responsibility, risks, liabilities and hazards incidental to the activities applied for (including, but not limited to, the serving of alcoholic beverages), and hereby release and forever discharge Vista Cay, its offices, directors, employees, agents and members, past, present, and future from any and all claims, costs, causes of action and liability for personal injury or death and damage to or destruction of property arising from my use of the Flex Room and its appurtenances.

6. I agree to indemnify and hold harmless the Association, Developer, its Directors, Employees, Agents, and Members, past, present, and future from any and all claims,

costs, causes, of action and liability (including, but not limited to attorneys fees) for any injury to either person or property, suffered by me, my family members, employees, agents, servants, guests, invitees or any member of the Association or any other person which arises from or are in any way related to the above activity, whether or not caused by the Association's negligence.

7. I assume all responsibility for all behavior of all persons attending or in any way related to the event and agree to be personally responsible for causing all such persons to comply with the Association Declaration Bylaws, Rules and Regulations. I acknowledge that violation thereof by any person present at attending or in any other way related to my event may, at the sole discretion of the Association Board of Directors, result in forfeiture of my deposit.

8. I understand that I am being granted the exclusive use of the Flex Room for the time period described above subject to the right herein reserved by the Associations Board of Directors, to enter the Flex Room and terminate my use there of should the conduct of any person or constitute a threat of any property.

9. I am at least Twenty-One (21) years of age and will be in attendance at my event. I hereby and represent that the Flex Room will be used for lawful purposes only and that if any conduct at the event I am sponsoring violates federal, state or local law or ordinances, my rights to the Flex Room shall be terminated and the Association shall have the right to take possession of the Flex Room and instruct my guests to leave the Property.

10. In the event of cancellation of my reservation forty-eight (48) hours or more before the reservation date, the deposit will be refunded in full. Cancellation after this time period will result in keeping of the deposit by the Association.

11. I agree to accept the Flex Room and return it at the times and places designated by Clubhouse Representative. I understand that my responsibility for the Association property and facilities, as provided for herein, extends until the room is vacated. It is my responsibility to obtain a receipt for conditions.

12. I agree that during my rental agreement time the Flex Room, contents, and related facilities will be vacated in the same condition they were in at the time I first occupied the room.

13. I understand that my reservation of the Flex Room on the aforementioned date will not be confirmed nor will this Agreement be binding until such time as the Agreement has been executed by the Association or its designated representative.

14. I have carefully read and understand this Flex Room Application for Reservation Agreement and Vista Cay Clubhouse Rules and Regulations agree to be bound by their terms.

Name: _____

Address: _____

City/State/Zip: _____

Day Phone: (____) _____

Evening Phone: (____) _____

Signature _____

Date _____

Deposit Fee: _____

Check Number: _____

Payee Name: _____

Date Paid: _____

Total Fee: _____

Check Number: _____

Payee Name: _____

Date Paid: _____

*Please make two separate checks payable to:
Vista Cay at Harbor Square Master Association*

Set-Up Information

Contact Person: _____

Contact Number: _____

Caterer:

Positioning of Furniture: _____

Technology Required: *WIFI* _____ *Projector* _____ *Plasma* _____

A/V Contact: _____

Other: _____