

HALLBROOKE PROPERTY OWNERS ASSOCIATION

C/o Aria Group, 480 24th Ave NW, Ste 106, Norman, OK 73072
(405) 701-8881, Fax: (405) 701-5060, email: hoa@ariagroupok.com

RESIDENT CLUBHOUSE RESERVATION FORM

Homeowner/Resident's Name: _____

Address: _____

Home Phone #: _____ Cell #: _____ Work #: _____

RESERVATION INFORMATION:

Date of Event: _____ Anticipated # of Guests: _____
(Not to exceed 140 people)

Specific Purpose of Use: _____

Is the event to be catered by an outside company? ____ Yes ____ No
If Yes, name of company _____

Will additional tables & chairs be brought in? ____ Yes ____ No
If Yes, name of company _____

Event Set-Up Time: _____ Start Time: _____ Finish Time: _____ (including clean up time)

Homeowner Cleaning: ____ Yes ____ No Cleaning Company: ____ Yes ____ No

I understand that I am responsible for meeting the conditions stated in the Clubhouse rules and Condition Check List as part of my entitlement in using the Hallbrooke Property Owners Association Clubhouse. I understand that I must be in attendance for the entire time of function. In the event that anything is damaged, I understand that I will forfeit my Security Deposit Fee. I am aware, also, that I am assuming responsibility for any and all accidents or claims that may arise as a result of any accident or for any reason in connection with the function of lease of the Clubhouse. I agree to the hold harmless clause in the Rental Agreement.

Signature of Homeowner/Resident

Date

For Office Use Only:

Rental Deposit/Fee Received: \$ _____ Check #: _____ Date Received: _____

Alcohol Deposit Received: \$ _____ Check #: _____ Date Received: _____

Accepted By: _____