



ARIA COMMUNITY ROOM RESERVATION FORM

Please complete the reservation form at least seven (7) days prior to your scheduled event and submit it to management onsite at the office or via email MSuarez@ActionLife.com as well as a \$500.00 returnable deposit check made out to Aria in order for your date/time to be reserved. The Community Room is available to all Owners, Tenants, and other occupants of the Condominium on a first-come-first-served basis and can be reserved for certain events.

Date Requested: _____

Start Time: _____

End Time: _____

Room is available daily from 8:00 am – 10:00 pm

Type of Event: _____

Estimated # of Guests: _____

Room Capacity is 65. Board may limit the amount of guests

Name: _____

Unit # _____

Phone: _____

Email: _____

Please tell us about your event by checking YES or NO to each item.

Music YES NO **(k) Music and other noise must be kept to a reasonable volume at all times. Any requests to turn down volumes or abate other noises from a resident must be promptly observed*

Caterers/Service **Name:** _____
Address: _____

Alcohol Served **(o) No alcoholic beverages may be served by or served to any person under the legal drinking age of twenty-one (21) years of age. The hosting party is solely responsible for ensuring that any alcohol served or consumed at an event complies with all applicable laws at all times. The hosting party is liable for any resulting damage, personal injuries, fees, or penalties arising from any alcohol consumption during the event in violation of such applicable laws and regulations.*

I HAVE READ THE PROJECT GUIDELINES AND AGREE TO ABIDE BY THEM AND TO PAY FOR ANY DAMAGE, MISSING ITEMS, AND FEES OR FINES LEVIED FOR INFRINGEMENTS.

Signature

Print Name

Date

OFFICE USE ONLY

DEPOSIT FEE: _____ INSURANCE CERTIFICATE: _____ BOARD APPROVAL: _____

FEE CHARGED: _____ SIGN MADE: _____ POSTED _____ DEPOSIT RETURNED: _____

ARIA COMMUNITY ROOM INSPECTION SHEET

Pre-Event Inspection Notes

Inspector's Name

Renter's Name

Only check mark any **pre-existing** damage or stains and its location as it applies:

- Carpet _____
- Walls _____
- Furniture _____
- Glass _____
- Doors _____
- Bar Area _____
- TV/AV System _____
- Other _____

***NOTE: The renter is responsible for cleaning the Community Room and leaving it as it was found. All trash must be disposed of, furniture returned to its original location, and no items may be left behind.**

Post-Event Inspection Notes

Inspector's Name

Renter's Name

Only check mark any **NEW** damaged or stained items and its location as it applies:

- Carpet _____
- Walls _____
- Furniture _____
- Glass _____
- Doors _____
- Bar Area _____
- TV/AV System _____
- Other _____

Additional Notes: _____

***NOTE: The renter of the Community Room must be onsite at all times to monitor the event and guests. At the end of the event the renter must again do a post-event inspection.**