

**SUMMER KITCHEN RESERVATION FORM**

Date of Application: \_\_\_\_\_

Unit Number: \_\_\_\_\_

Owner/Resident Name: \_\_\_\_\_

(Please Print)

Date of Reservation: \_\_\_\_\_

Time of Reservation: \_\_\_\_\_ to \_\_\_\_\_

Number of Guests: \_\_\_\_\_

- ❖ **\*Extra valet is required for group events where 6 or more people are planned to be in attendance.**
- ❖ **\*Extra security is required for group events where 25 people or more are planned to be in attendance.**

Please make arrangements for extra valet and security with the Management Office at least 3 days in advance of your event.

**It is mandatory that all residents and guests abide by the rules and regulations of City Place South Tower**

Reservation of the Summer Kitchen for a private event is restricted to Owners/Residents. Use for an event is by reservation only, made with the Association Management Office at least 48 hours in advance. There is a \$500 refundable security deposit required at the time of reservation.

Owner/Resident is responsible for immediate cleanup of the Summer Kitchen after the event, which includes but is not limited to removal of all trash and return of all furniture to its place. The Summer Kitchen will be inspected by a staff member at the conclusion of the use. If the Association needs additional cleanup of the area after such use, all costs associated with cleanup will be borne by the Owner/Resident. In the event any damage or clean up fees exceeds the amount of the security deposit; the resident will be fully responsible for these charges. No breakable objects and/or containers are permitted beyond the immediate area of the Summer Kitchen.

**A refundable security deposit of 500.00 is required for authorization to use the Summer Kitchen or have an event on the Pool Deck.**

**The Association has the right to deny any request. Association sponsored events will have priority over any private event. NO RESERVATIONS CAN BE MADE FOR USE ON HOLIDAYS.**

Date Deposit Received: \_\_\_\_\_ Check Number: \_\_\_\_\_ Date Deposit Returned: \_\_\_\_\_

Damages (If Any): \_\_\_\_\_

I agree to the terms set forth above: \_\_\_\_\_

(Resident Signature)

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_