

COMMUNITY ROOM RENTAL FORM

750 Kappock Apartment Corp.

NAME: _____

APT #: _____

DATE OF EVENT: _____

FROM: _____ TO: _____

OCCASION: _____

NUMBER OF GUESTS: _____

WILL FOOD BE SERVED? _____

PHONE NUMBER: _____

WILL BEVERAGES BE SERVED? _____

WILL PARTY BE CATERED? _____

I am a resident of 750 Kappock Apartment Corp. and will follow the rules and regulations listed below with regard to the rental of the recreation room:

1. I will leave a refundable deposit of **\$200** to be returned within 10 days, if no damage is done to the recreation room and a rental room fee of **\$200**, both checks made payable to **750 Kappock Apartment Corp. (2 separate checks)**.
2. I will leave the room in the same condition in which it was found.
3. Should any cleaning of the room be required, I understand that this will be deducted from the aforementioned deposit.
4. I will make my guests aware of 750 Kappock Apartment Corp. Rules & Regulations.
5. I will make my guests sign in at the doorman's desk.
6. I will make certain that no children will run or play in halls or lobby and will be supervised at all times.
7. I will completely remove tape used to hang decorations.

By virtue of my signature below, I personally assume all financial and legal liability that may result from the utilization of the recreation room on the aforementioned date.

SIGNED: _____

DATE: _____

SUPER/MANAGEMENT: _____

DATE: _____

(Management Use Only)

\$200 Deposit Rcvd: _____ Check #: _____ Deposit Returned: _____

Damage Deposit Held: _____

\$200 Rental Fee Rcvd: _____ Check #: _____

Management Signature: _____

Date: _____