CONTRACT FOR USE OF THE COMMUNITY BUILDING

TRAILS WEST HOMEOWNERS ASSOCIATION, INC.

NAME OF RESIDENT REQUESTING CLUBHOUSE:	
ADDRESS:	
PHONE:	EMAIL:
DATE REQUESTED:	
EXPECTED NUMBER IN ATTENDANCE:	
DESCRIPTION OF FUNCTION:	
START TIME:	END TIME:
USE FEE OF \$75.00 WITH \$200.00 REFUNDABLE DEPOSIT PAID TO "TRAILS WEST HOA" Checks to be mailed to: Trails West Homeowners Association, Inc. 4188 S Atlantic Ave. New Smyrna Beach, FL 32169 CHECK RECEIVED DATE: CHECK #:	
	THE COMMUNITY BUILDING
the Trails West Homeowners Association, Inc. Except as otherwise provided in the contract, any violation of the rules contained herein will result in cleaning and repair charges made to my account if facility is not returned in a clean and orderly state. I further understand that this contract only allows the use of the interior of the clubhouse; it does not include the exclusive use of the pool, playground, picnic area, deck or parking lot. I may not remove any furniture of equipment from the building. The building is a NON-SMOKING FACILITY. I have read the Policies and Procedures regarding use of the Community Building as well as the Clean-Up Check List attached hereafter and I agree to abide by all such Policies and Procedures in my use of the facility. In addition, I understand my failure to abide by the Policies and Procedures is grounds for cancellation of the planned function as well as justification for the Board of Directors to refuse to grant me permission to contract for use of the facility at a later date.	
INDEMNIFICATION AND HOLD HARMLESS AGREEMENT	
I, the undersigned, do hereby INDEMNIFY AND HOLD THE TRAILS WEST HOMEOWNERS ASSOCIATION, INC., its officers, directors or management, HARMLESS from any and all claims, damages, injuries, and other causes of action (including any and all costs or attorney's fees incurred in the defense of or settlement of such claim) made or asserted against Trails West Homeowners Association, Inc., its directors, officers or management, as a result of my use of the Community Building.	
ATTENDANCE ACE	KNOWLEDGEMENT
I hereby affirm that I am a Resident or Property Owner in Trails West and will be in attendance at the function described in the Contract for Use of the Community Building AND that I am responsible for any damage to the facility caused by me or my guests.	
Owner:	Date: