COMMUNITY ROOM RENTAL FORM

Name of Member: __________________________________________

Email: ___________________________ Phone#: _______________________

Size of Party: _______ Time of event: ___________________ Requested date ________________

Event description with special details to note: __________________________________________

Plan use of pool: NO/Yes (if yes how many and at what time) ___________________________

Rental Fee Rates:

20 or less = $ 80
21 to 40 people = $ 160
41 to 59 people = $ 240

Note: Parties 60 + will need prior approval with plan use of outside deck paying additional rate of $80 per 20 people and not exceed 100 people.

Security Deposit: The security/damage/additional cleaning deposit minimum of $100 or the same as your rental fee, whichever is greater. Your security deposit should be made in a separate check upon reservation. Please include a self addressed envelope with your rental form so your deposit may be returned if everything is satisfactory by management otherwise it will be shredded.

Lifeguard Fee: $20 per hour per lifeguard with a minimum of two hours. If there is plan use of the pool in season of spring/summer we recommend one lifeguard for every 20 users with minimum two week notice to schedule. Note: Off season parties Fall/Winter or if use of the pool occurs at anytime then sponsoring member(s) are responsible to provide adequate adult supervision of the pool.

PAYMENT: Rental Fee:___________ Lifeguard Fee:___________ TOTAL DUE______________

In consideration of being granted the use of SCRA on the terms listed
1. In full agreement with this contract with all fees paid by Member of Club.
2. Both the person in charge and I assume personal responsibility for the undertaking.
3. To pay for any damage to the facilities incurred in the course of the rental.
4. Violations of rental/SCRA club rules constitute grounds for the forfeit of the deposit.
5. To provide adequate chaperones for parties attended by juveniles.
6. As the member responsible for the rental/party I will be in attendance the entire time.

Primary Member’s Signature_________________________ Date__________

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Office Section------------------------------------------------------------------------
Security Check received_________________________ Rental Check received_____________________
Security Check returned/shredded_________________ Rental check processed___________________