

Park Place Clubhouse Rental Request
Please PRINT all information

Name: _____

Address: _____

Phone: _____ (home) _____ (cell)

Date of Event: _____

Start Time of Event: _____ End Time of Event: _____

Number of Adults: _____ Number of Children: _____

PLEASE REMEMBER

1. Clubhouse and restrooms must be cleaned. Renters provide their own cleaning supplies.
2. There is NO smoking in the clubhouse. Smoke outside on pool deck. USE ASHTRAYS.
3. NO GLASSWARE ON POOL DECK.
4. TRASH goes in LARGE GREEN Trash at BACK of clubhouse. RECYLCABLES go in the BROWN RECYCLE container on the pool deck.
5. When the pool is closed, you are responsible for taking trash to street for pickup of Fridays and returning can to back of clubhouse.

For HOA Use Only

Rental Check # : _____

Deposit Check #: _____

Date/time key given to renter: _____

Date/time key received from renter: _____

Condition of Clubhouse after rental: _____