



CLUBHOUSE RENTAL AGREEMENT

LAKELAND HOMEOWNERS ASSOCIATION
P.O. BOX 1215
LOXLEY, ALABAMA 36551
251-964-216

(This section to be completed by the Renter)

Name _____

Address _____

Phone _____

Rental Date _____

Purpose _____

Estimated Number of Persons Attending _____

Starting Time _____ Ending Time _____ (Must conclude by 10:00 pm)

(This section to be completed by the Rental Coordinator)

Rental Fee Amount \$ _____

Security Deposit Amount \$ _____

Key Furnished Date _____

Clubhouse Inspected Date _____

Key Returned Date _____

Deposit Returned Date _____

I have read and understand the rules of the Clubhouse and agree to abide by them.

Signature of Renter _____ Date _____

Signature of Coordinator _____ Date _____