



**AGREEMENT FOR PRIVATE PARTY USE OF
THE FOUR SEASONS LAKESITES POA
SHAWNEE BEND MEETING ROOM**

1-25	nonrefundable usage fee: \$75.00	refundable deposit fee: \$75
26-50	nonrefundable usage fee: \$125.00	refundable deposit fee: \$126

- **The usage fee is due at the time of the reservation**
- **Make checks payable to Four Seasons POA**
- An attendant will be required for an event lasting later than 10:00 p.m. There will be an additional fee of \$15.00/hour paid directly to the Missouri Association Management approved attendant.
- Two hours of cleaning are included in the usage fee. In the event cleaning requires more than two hours, the amount will be deducted from your deposit. Please complete the items on the "After Party Checklist" to avoid additional fees.

Today's Date: _____ Date of Event: _____

Property Owner's Name: _____ Phone #: _____

On-site Contact: _____ **Phone #:** _____
(if different from above)

Lot & Subdivision: _____ Mailing Address: _____

Email Address: _____ Type of Event: _____

____ Property Owner or ____ Immediate Family Member

Estimated Attendance _____ (50 max.)

We will need the Shawnee Bend Meeting Room prior to event to decorate at: _____ a.m. /p.m.
Event will begin at: _____ a.m. /p.m. Event will end at: _____ a.m. /p.m. (include clean up time)

Please initial one:
____ I would like to schedule a walk-through with Management
Date: _____ Time: _____
____ I have declined a walk-through with Management

By signing this reservation form, you are agreeing to:

1. Submit the usage fee and deposit fee when the reservation is made to ensure availability for your event.
2. Follow all rules of the POA Shawnee Bend Meeting Room (see attached).
3. Use your best effort to ensure your group makes use of the Shawnee Bend Meeting Room and furnishings in a careful and prudent manner.
4. Report any damage, spills or problems occurring during your use period, to Management.
5. Remove any and all articles that were brought in (food, drinks, decorations, etc.).
6. Certify that your event is being held directly for you, the property owner, or immediate family member. The property owner reserving the Shawnee Bend Meeting Room must be present during the entire event and take full responsibility of adhering to the rules and regulations.
7. Complete the After Party Checklist and leave on the kitchen counter or return to the offices of Missouri Association Management, LLC, to receive the deposit fee in return.

In consideration of my acceptance of this reservation of the use of the above facility, I waive any and all claims for myself and my guests against the officials and employees of Missouri Association Management, LLC and Four Season Lakesites Property Owners Association for injury, illness or damage which may occur directly or indirectly from my use of this facility. I hereby, unconditionally and without reservation, assume legal liability and financial responsibility for damage or loss suffered by the Four Seasons Lakesites Property Owners Association or any of its property occasioned by said use and further promise to promptly pay upon demand any damages reasonably itemized and requested by Four Seasons Lakesites Property Owners Association or its management. I agree as Property Owner that I will attend the event and further, I accept the responsibility for the conduct of any persons in attendance.

Signature of Property Owner

Date

For Office Use Only

Assessments Paid (all properties): Y or N

Usage Fee: _____ Deposit Fee: _____ Date Received: _____ Date Deposit Returned: _____