## DEL TIERRA HOMEOWNERS' ASSOCIATION, INC.

## **RESERVATION FORM**

Resident Name:		Phone:	
Del Tierra Address:	Email Address:		
Mailing Address (if different than abo	ove):		
I hereby request the use of: (Please only choose 1)			
Pavilion (\$250 deposit required)	Soc	cer FieldPlayo	ground Party Area
Date of Request:	_ Time:	AM/PM to	AM/PM
Reason:			
I assume full responsibility for the concamenity I am reserving at termination Management, Board of Directors, or regarding excessive noise and/or distoccupied.  *For Pavilion reservations, accompa \$250.00 which will be refunded to methat I found it.	n of use. I ac any of their a turbances en nying this req	knowledge the right agents, to make any anitting from the amer	of the and all judgments nity being amage <b>deposit of</b>
Resident Signature	 Da	ate	
	Signature		- <u>————————————————————————————————————</u>
Left in:GoodFairPoor	<u> </u>	- aa a	
Pavilion Only			
\$ of deposit refunded to res	ident on	If less that	n \$250 deposit
was returned, reasons:			