CONTEMPO HOMEOWNERS ASSOCIATION

4190 Gemini Drive, Union City, CA 94587 Phone: 510-489-4440

FACILITY USE APPLICATION CABANA 2 32500 METEOR DRIVE

1.	APPLICANT:				PHONE	# [HOME]				
			PHONE	# [WORK]				= #	
2.	CONTEMPO ADDRESS:									
	MAILING ADDRESS IF DIFFERENT	FROM A	BOVE							
3.	PRINT NAME OF PERSON IN CHAI	RGE OF F	UNCTION	:						
	PHONE NUMBER				_					
4.	USE DATE:		SET UP:	FROM		_AM/PM	то		_AM/PM	
	PARTY HOURS FROM			_AM/PM	TO					_AM/PM
5.	TYPE/AGE OF GROUP:			CHILDRE	N:			_FAMILY	:	_ADULT
6.	NATURE OF FUNCTION						EST. AT	TENDAN	CE:	
	WILL ALCOHOL BE SERVED?	Y/N	TYPE:		BEER:		WINE:			
	WILL THERE BE TAPED MUSIC:	Y/N			LIVE M	USIC/DJ:				
7.	EVIDENCE OF INSURANCE- CERTIF	ICATE RE	QUIRED							
	AMOUNT OF LIABILITY INSUR	ANCE \$1	.000.000							

• CONTEMPO Homeowners Association named as additional insured.

CONTEMPO HOA; 3250 METEOR DRIVE, UNION CITY, CA 94587

I, the undersigned applicant, have read and agree to abide by the Rules and Regulations of the Cabana for CONTEMPO Homeowners Association ("CHOA"). I also understand that private security guards may be required at my event. In the event any law enforcement agency responds to any complaint with regard to the above-mentioned function, the undersigned agrees to pay, indemnify, hold harmless the CONTEMPO Homeowners Association for any fees and costs stemming from the above.

I, the undersigned applicant, taking full responsibility for myself, family and guests, agree to hold the CHOA free and harmless from and against any loss, expense, liability, death, injury, damage, caused of action, or claim (including federal and state claims) arising from or related to the use of the CONTEMPO association facility except those caused by the CHOAS's sole negligence or wrongdoing. SIGNATURE OF APPLICANT:

FOR OFFICE USE ONLY DATE REC'D	<u></u> BY		DUES CURRENT: 🛛	
SECURITY GUARDS REQUIRED 🗆:	NUMBER REQUIRED:		COST	
DEPOSIT REQUIRED	USE FEE REQUIR	ED		
PICK UP KEY: DATE	TIME	AT OFFICE		