

Abbington

ABBINGTON OF CABARRUS HOMEOWNERS ASSOCIATION CLUBHOUSE / POOL RENTAL AGREEMENT

Name of Homeowner(s): _____

Address: _____

Telephone numbers: Home _____ Work: _____

Date Requested: _____ Day of Week: _____

Time of Party: (From) _____ (To) _____

Lifeguard's Name: _____ Cert. _____ #: _____

Number of People Attending: Adults _____ Children (1-13 yrs.) _____

Rental Fee Received: _____ Deposit Received: _____



The clubhouse facilities may be rented for private parties sponsored by Abington homeowners. All clubhouse rentals are limited to the hours of 8:00 A.M. to 1:00 A.M. with a maximum attendance of 75 people. For every 10 guests under the age of 25 years, an adult over the age of 25 must be present. The clubhouse is a non-smoking facility and the Abbington of Cabarrus Homeowners Association, Inc. reserves the right to grant or deny rental of the clubhouse. In scheduling use of the clubhouse, Association functions shall take precedence over private parties. The sponsoring homeowner(s) must be present for the duration of the party. (If the pool is going to be used in conjunction with the clubhouse for your event, adequate supervision will be required to be on site for a total of and is the sole responsibility of the homeowner who rents the clubhouse facility.)

If any alcoholic beverage is served, proof of homeowner(s) insurance must be provided. All homeowner's policies provide host liquor liability as a part of their standard coverage. Proof of such insurance must be delivered to the clubhouse committee at least one week prior to the clubhouse rental or this rental agreement is subject to automatic termination by the Association. If you have questions regarding your specific coverage, please consult your insurance agent.

Under no circumstances shall any alcoholic beverage be *sold* at any event held at the clubhouse.

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The Chairperson of the Clubhouse Committee, will officially reserve the facility, subject to availability, upon receipt of deposit, rental fee and signed rental agreement.

Each homeowner(s) is responsible for cleaning the clubhouse after the party per the attached checklist. An inspection will be completed the morning after each party along with confirmation that keys were returned. The deposit will then be released.

The rental fee is \$50 with a refundable deposit of \$150. The Association requests that you send these payments in **two separate checks made out to Abbington HOA** – one for the fee and one for the deposit. The rental fee will be used by the Homeowners Association to help with maintenance costs and the deposit check will be held until after the inspection. If the clubhouse is left clean and undamaged, the deposit check will be mailed back to the homeowner(s).



1. I am not using the pool facility and hereby release (Initials) _____
the Association from any and all liability surrounding
use of the pool during this event.

OR

I am using the pool facility and will provide adequate (Initials) _____
trained, supervision, hereby releasing Abbington HOA from any
liability surrounding use of the pool during this event.

2. No liquor will be served at the subject event (Initials) _____

OR

Liquor is to be served and I have obtained necessary (Initials) _____

_____ forms and submitted them.

I/We, the homeowner(s) have read and is/are familiar with the provisions of the above Agreement and the Rules of the facilities, and agree/s to comply with the same.

(Homeowner Signature)

(Date)

(Homeowner Signature)

(Date)

Checks should be made payable to
Abbington HOA and then sent to:

Melissa Arnold
4138 French Fields Lane
Harrisburg, NC 28075

OR

Julie Phillips
9016 Dover Road
Harrisburg, NC 28075

*Contact Melissa at (704) 454-5523 or Julie at (704) 455-4644
the day before the event to arrange for the key.*

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ABINGTON OF CABARUS CLUBHOUSE HOMEOWNERS CLEAN-UP CHECKLIST

Name of Homeowner/Host: _____

Date of Event: _____

The Association does not provide a cleaning service after each event. Several events may be booked back-to-back in the clubhouse. Therefore, it will be necessary for the homeowner to leave the facility clean. Otherwise, you will be responsible for the cost of the additional cleaning service. Your fee pays for the management company coordination services, the follow-up inspection and periodic cleaning and supplies.



_____ Bathrooms clean. No trash or water on the floor.

_____ Kitchen cabinets and counter tops clean.

_____ Refrigerator clean and empty. Sinks clean. No food or drinks left behind.

_____ Tables left clean and all furniture in its place.

_____ Floors clean. Tile mopped if spills occurred and carpet vacuumed.

_____ Surrounding grounds in order.

_____ Inspect general overall condition of facility.

_____ Empty trash cans and deposit garbage in the large roll-away containers.

_____ Clean glass doors.

Comments: _____

Date Inspected: _____ Signature: _____