

# Ironwood Crossing Homeowners Association Multi-Purpose Room Reservation Request Form

Reservations will be approved on a first come first served basis. This form must be completed and returned with deposit to Ironwood Crossing Homeowners Association (c/o CCMC, 8360 E. Via de Ventura, Suite L-100, Scottsdale, Arizona 85258) **10 days prior to booking to guarantee reservation.**

Request Submittal Date: \_\_\_\_\_ Requested Date of Use: \_\_\_\_\_

Name of Person Requesting Facility: \_\_\_\_\_

Address: \_\_\_\_\_ Lot # \_\_\_\_\_

Home Phone: \_\_\_\_\_ Pool Card #: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Community Owner:  Community Renter:

*\*\* A Community Renter may not rent the facilities without a current lease agreement on file with the Association.*

Event/Use: \_\_\_\_\_

**Events may not exceed 6 hours in length including set up and take down.**

Setup Start Time: \_\_\_\_\_ Teardown Start Time: \_\_\_\_\_:\_\_\_\_\_

Event Start Time: \_\_\_\_\_ Event Finish Time: \_\_\_\_\_:\_\_\_\_\_ *(No later than 9:30 p.m. Everyone must be out of the facility by 10:00 p.m.)*

Number of Guests: \_\_\_\_\_ *(may not exceed 48)*

Equipment Requested: \_\_\_\_\_

Tables: Yes or No *(please circle)* Quantity: \_\_\_\_\_ Chairs: Yes or No *(please circle)* Quantity: \_\_\_\_\_  
*(may not exceed 10 tables) (may not exceed 48 chairs)*

**NO ALCOHOL IS ALLOWED AT THE IRA A. FULTON AQUATIC CENTER.**

**I/We have received and reviewed the Multi-Purpose Room Reservation/Rental Rules and Regulations and agree to abide by them.** \_\_\_\_\_

*Initials*

Signature: \_\_\_\_\_

*Signature of Responsible Party*

Account # \_\_\_\_\_ Date: \_\_\_\_\_

*All reservations are confirmed at the discretion of Management.*

\*\*\*\*\*

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

*Community Association Manager*

Payment Type/Amount \_\_\_\_\_