Avalon of Orange County Condominium Association, Inc.

Billiard Room Rules

1. The Billiard Room is open Monday through Friday from 8:00am to 4:00pm. Please note, you may not check out the key between the hours of 12pm and 1pm.
2. Residents of Avalon are only allowed to check out the Billiard Room key. If you are not a verified Resident of Avalon, you may not check out the key. Guests or family may not check out the Billiard Room key.
3. Any Resident checking out the key for the use of the Billiard Room must leave their driver's license at the front desk and sign the agreement below. Upon return of the key, Residents will be given back their driver's license.
4. The Billiard Room may only be used for a maximum of two hours.
5. The maximum occupancy of the Billiard Room is 4 persons: Resident and up to three guests.
6. Children under the age of eighteen (18) are not permitted in the Billiard Room, even with adult supervision. This amenity is intended for adults only.

Billiard Room Agreement

It is understood that I am a resident at Avalon of Orange County Condominium Association, Inc. and agree to abide by the Avalon of Orange County Condominium Association, Inc. rules and regulations governing the use of the Billiard Room.

____ My guests and I will be drug free. The Billiard Room is a smoke free area.

____ I understand, should there be any damages to the facilities during my use of the Billiard Room, I will be charged accordingly for the repairs incurred.

____I understand if I do not return the Billiard Room Key within the allotted time frame of two hours and within the same day the key is checked out, I will be required to leave a deposit in the amount of $50.00 via money order only on the next occurrence I wish to check out the billiard room key. The deposit will be returned to me once I return the key within the allotted time frame.

I, _____, hereby agree that by signing this agreement, will be responsible concerning my guests whom I have with me during the use of the Billiard Room and are responsible for their actions and any possible damages incurred from said guests.

Dated this _____ day of _____, 2014.

_____

Resident Signature Unit Address Date

4417 South Semoran Blvd. Orlando, Florida 32822 • 407-737-4122 Office • 407-737-4123 Fax