

RELEASE FORM
FOR CLUBHOUSE RENTAL

FOR VALUABLE CONSIDERATION, the receipt and sufficiency of which are hereby acknowledged, I, _____ for myself and on behalf of my successors, heirs, assigns, and guests, do hereby release LACAV IMPROVEMENT COMPANY, its agents, employees, attorneys and representatives (“Releasees”) from any and all liability for any damage or loss I might sustain from my use of LaCav’s Clubhouse and related facilities, including: the swimming pool and tennis court and matters directly related thereto.

Renter acknowledges that nothing in this agreement prevents his/her own liability for any and all injuries or damages that arise from use of the Clubhouse, Swimming Pool and Tennis Court. Renter further agrees to advise guests appropriately and accordingly.

I further agree to abide by the Conditions for Rental and Rules concerning functions at the LaCav Clubhouse Complex as follows:

1. As the sponsoring member for this function on _____, I will attend the function.
2. I will pay a **\$500.00** fine if there is:
 - a. Smoking in the clubhouse or anywhere on the grounds.
 - b. Any music outside of the interior of the Clubhouse or unreasonable noise anywhere on the Clubhouse Complex.
3. If granted permission by Twin Lakes Baptist Church to use their parking lot for guest parking I will send an honorarium of a minimum of \$50.00 to Twin Lakes Baptist Church for the use of their parking lot. **Twin Lakes Baptist Church, 673 Lake Cavalier Road, Madison, MS 39110. 601-856-2305**

I have received, read and agree to accept the provisions in the Lake Cavalier Association “**Conditions for Rental of the Clubhouse**”.

Signed: _____
Lake Cavalier Member in good standing.

Date: _____

Co-Signed: (if non-member) _____

Address, e-mail address, and contact phone number if not Lake Member

**THE MEMBER RENTING THE CLUBHOUSE MUST SIGN
AND FILL OUT THE AGREEMENT BELOW**

Please print your name _____

I, _____, agree to the conditions for
Signature

rental of the Lake Cavalier Clubhouse. Date: _____

Date of function: _____

Time of day of function: _____

How many attending: _____

Type of function: _____

The member must also sign the Lake Cavalier Release Document

**Please return these signed copies along with a check for clubhouse
rental to lake secretary:**

**Debbie Saik
118 Shady Lane
Madison, MS 39110**