

**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:**

**Whitney Burns  
130 Moss Lane  
Madison, MS 39110  
601-946-1545 /admin@lakecav.org**