

WALDEN WOODS COMMUNITY SERVICES ASSOCIATION
REQUEST FOR RESERVATION OF WALDEN WOODS CSA PICNIC PAVILION AND BALLFIELD
PARK ADDRESS: 1510 Timber Trail, Imperial PA 15126

Date of Request:	Date and Time Reservation Wanted:	Requested Area for function: <input type="checkbox"/> Pavilion <input type="checkbox"/> Ball Field <input type="checkbox"/> Both Areas
Resident's Name:		Resident's Address:
Organization's Name (if applicable):		Organization's Address (if applicable):
Description of Function:		
Estimated Number of Guests:		Resident's Home Phone Number:

Resident hereby wishes to reserve the Walden Woods CSA ("WWCSA") Area indicated above for Resident's stated function. Resident, through his/her signature below, declares that he/she has read, understands, and agrees to fully comply with and abide by the conditions and use restrictions listed below:

- A. Resident acknowledges, agrees, and understands that this Reservation Request is subject to approval by the WWCSA Board and/or the WWCSA Office Manager. The WWCSA Board or Office may, but shall not be limited to, considerations of the following conditions: parking / traffic considerations; prior approved reservations of the Requested Area; prior violations by Resident; and/or outstanding dues owed by Resident. Denied requests shall be accompanied by a letter outlining the reasons for such denial along with the Resident's security deposit.
- B. Resident acknowledges receipt of a copy of the **Rules for Reserved Use of Baseball Field and Picnic Pavilion**, has read and understands such Rules, and agrees to fully comply and abide by such Rules.
- C. Resident agrees to comply with Policy Resolution No. 1, as amended, the Walden Woods Declaration of Covenants, Conditions, and Restrictions and any and all federal, state and local laws to the extent applicable.
- D. Resident understands that, there is a **\$35.00 NON-REFUNDABLE** fee for the use of the Port a Jon and electric. Residents are required to also place a security deposit with the WWCSA office manager at the time of filing this request in the amount of \$150.00. **Security deposit payment MUST be submitted with reservation request form. Please submit two separate checks.**

The security deposit will be returned to the resident within fifteen (15) days after use less any deductions for the costs of damage, repair and/or maintenance to the Requested Area and/or adjoining areas necessitated by such use. In the event of any deduction, the resident shall receive an itemized statement regarding the repair or maintenance costs. Costs of repair or maintenance in excess of the security deposit will be assessed to the Resident.

In the event that Resident has reserved the Requested Area for multiple dates, then the security deposit shall be retained by the WWCSA until all reserved dates have passed. Security deposit less any necessary deductions, as described in the preceding paragraph, shall be returned within fifteen (15) days after the last reserved date. At no time, nor under any circumstances, shall the WWCSA be liable for any interest payments regarding the holding of such security deposit.

- E. Resident acknowledges that this reservation request is solely for the Area(s) indicated above and is not applicable to the WWCSA tennis courts, playground, or basketball courts.
- F. Resident accepts responsibility for the actions of his/her guests who attend the function for which this reservation is sought and assumes any and all liability for any and all lawful fines or assessments imposed by the Board, whether imposed upon Resident or his/her guest, for violations by the resident or guests of conditions and restrictions described herein.
- G. Resident agrees that use of the Requested Area and adjoining area(s) by Resident and his/her guests is solely at the risk of the Resident and his/her guests. Further, Resident and his/her guests agree to indemnify, defend and hold harmless the WWCSA, its officers and employees from any and all claims, suits, damages and losses whatsoever for or on account of personal injury to any persons and/or damage to any property arising from, or in connection with, whether directly or indirectly, Resident's reserved use of the Requested Area by Resident and his/her guests unless attributable to the sole negligence of the WWCSA.

Resident's Signature

Date

Walden Woods CSA -Representative
7900 Steubenville Pike, Suite 20, Imperial PA 15126 724-685-8100

Date
wwcsa@outlook.com <http://wwcsa.com>