



Centre Pointe Condominium Association

Clubhouse Reservation Form

**** ALL RESERVATIONS MUST BE MADE 30 DAYS IN ADVANCE ****
(Four [4] Hour Room Reservation Intervals)

Building/Unit Number _____ **Date** _____

Owners Name _____

Phone Contact # _____ **Event Date** _____

Time of event _____ **AM/PM** **Until** _____ **AM/PM**

Number of guests _____

(May not exceed 50)

THE RENTAL FEE IS PAYABLE ON THE DATE THE RESERVATION IS MADE.

Make two checks payable to Centre Pointe Condominium Assoc.:

NON-REFUNDABLE RENTAL FEE \$25.00

RECEIVED _____ [Owner Rental]

TYPE OF PAYMENT _____ BY _____

DEPOSIT \$100.00

RECEIVED _____

TYPE OF PAYMENT _____ BY _____

All Activities are subject to all Centre Pointe Rules & Regulations

APPLICANT CURRENT WITH ASSOCIATION DUES _____

APPLICANT GIVEN CLUBHOUSE CHECK OFF LIST _____

I agree to accept and comply with all Centre Pointe and Clubhouse Rules & Regulations.

Home Owner's Signature

Unit #

Date

Return form to:

INTEGRA Condominium Association Management, Inc.
P.O. Box 31936 [office physical address: 2183 Alpine Way]

Bellingham, WA 98228

Questions: Please call INTEGRA at: 360-656-5091