

## ACTIVITY RESERVATION FORM

Date Received by Office: \_\_\_\_\_

Shareholders/Residents Name: \_\_\_\_\_ Phone No. \_\_\_\_\_

Email Address: \_\_\_\_\_

### RESERVATION IS FOR:

*Circle All Applicable*

Woods Hall

Terra Siesta Hall

Live Oaks Park

Woods Kitchen

Terra Siesta Kitchen

Bocce Ball Ct

Woods Card Room

Pickleball Ct

Woods Pool

Shuffleboard Ct

Horseshoe Pit

**DAILY or WEEKLY Activity Name:** \_\_\_\_\_

**List starting date and ending date for this activity:**

\_\_\_\_\_

ENTIRE TIME NEEDED INCLUDING SETUP TIME: Start: \_\_\_\_\_ AM/PM Finish: \_\_\_\_\_ AM/PM

Day(s) of the Week: \_\_\_\_\_ Time to publish in Calendar: \_\_\_\_\_ AM/PM

**MONTHLY ACTIVITY NAME:** \_\_\_\_\_

**List starting date and ending date for this activity:**

\_\_\_\_\_

ENTIRE TIME NEEDED INCLUDING SETUP TIME: Start: \_\_\_\_\_ AM/PM Finish: \_\_\_\_\_ AM/PM

Day of the Week: \_\_\_\_\_ Time to publish in Calendar: \_\_\_\_\_ AM/PM

### \*\*DISCLAIMER\*\*

Any Event that includes ticket sales must get approval from the Board of Directors and the Property Manager

Please contact the office with any changes or questions. **ALL** changes must be in writing and given to the office before the 12<sup>th</sup> of each month for publishing in the newsletter.

Office Number: 941-723-1260 Email address: [manager@terrasiestacoop.com](mailto:manager@terrasiestacoop.com)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Activities Coordinator Approval: \_\_\_\_\_ Date: \_\_\_\_\_