

TODAY'S DATE _____



Association of Apartment Owners
75-6060 Kuakini Highway
Kailua-Kona, HI 96740
Tel: (808) 443-7436 FAX: (808) 331-1082
Email: manager@konaseavillas.com

EVENT REGISTRATION

For KSV residents hosting an event for 6 – 20 people

Name _____ Unit # _____

Phone _____ Date of Reservation _____

Time of Reservation (4 hour maximum; may not go past 9 pm) _____

Reason for Event _____

The following rules must be abided by for all events held at KSV:

1. Reservations should be made 2 weeks in advance, if possible.
2. A maximum of 20 guests is allowed. Any exceptions to this rule must be approved by the Site Manager BEFORE the event.
3. The area may not be used for FOR PROFIT or commercial purposes.
4. A deposit of \$100, for the community area, along with the pool, spa and the BBQ area, is required when the reservation is made. The deposit will be returned within 3 days if all the rules were followed, all furniture was restored to its original location, and the area was appropriately cleaned.
5. Persons making the reservation will be held responsible for the conduct of their guests.
6. Persons making the reservation must inform guests to use only designated GUEST parking.
7. Pool gates are to be locked at all times.
8. Glass containers are allowed in the BBQ area only.
9. No smoking is allowed.
10. You and your guests will be expected to follow all KSV pool and spa rules. These include showering before using the pool and spa, no running, jumping, climbing, horseplay, loud or boisterous behavior, and no toys in the pool or spa. No one under age 5 or anyone wearing diapers may use the spa, and diapered children must wear swim-specific diapers in the pool.
11. No amplified electronic equipment (radio, stereo, etc.) is allowed.
12. Alcoholic beverages are only allowed under the covered BBQ area, and only by those 21 years and older.
13. Children under the age of 14 are not allowed in the Fitness Center.

ENJOY,
Kona Sea Villas Management

**ASSOCIATION
USE ONLY**

Date Received _____ Resident Received Copy YES _____ NO _____
 Check # & amount _____
 Condition of area after event _____
 Check Returned/Date _____