

# MARINA VILLAGE SPECIAL EVENT ROOM RENTAL INFO SHEET

PHONE: 619.222.1620

FAX: 619.222.0634

WEB: WWW.MARINAVILLAGE.NET

First/Last Name of Contracting Party: \_\_\_\_\_  
or FIRST & LAST NAMES OF BRIDE & GROOM

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone #s: \_\_\_\_\_  
CELL WORK HOME

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

Best Time / Method to contact: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License Number & State of Issuance: \_\_\_\_\_

EVENT DATE: \_\_\_\_\_ What type of event is this?: \_\_\_\_\_

ROOM NAME: \_\_\_\_\_ LAWN (if applicable): North [ ] South [ ] Time (3hr block): \_\_\_\_\_

How many total guests do you expect? \_\_\_\_\_ Is this an "invite only/RSVP" party? Y [ ] N [ ]

If not, how will you monitor the number of allotted guests? \_\_\_\_\_

Caterer's name and phone number: \_\_\_\_\_  
(PLEASE SUBMIT A COPY OF CATERER'S CERTIFICATE OF INSURANCE PRIOR TO EVENT WHEN APPLICABLE.)

Do you plan on having a cash bar or an open bar? \_\_\_\_\_ If cash, provide liquor license #: \_\_\_\_\_

Will you have any guests under the age of 21 at your party? \_\_\_\_\_

*Filling out this form confirms that the contracting party agrees to monitor all minors and accept responsibility for party attendees to abide by the law regarding not serving alcoholic beverages to persons underage of the legal drinking limit.*

How did you hear about Marina Village? : \_\_\_\_\_

MASTERCARD/VISA Number _____ 3-Digit CVC/CVV Code _____ (WE DO NOT ACCEPT AMERICAN EXPRESS OR DISCOVER)
Card Holder's Name: _____ Card Exp. Date: ____ / ____ (PLEASE PRINT)
Amount of Deposit: _____ Authorization to Charge Card: _____ SIGNATURE

IF CREDIT CARD BELONGS TO SOMEONE OTHER THAN THE CONTRACTING PARTY, PLEASE FILL OUT THE INFO BELOW.

MASTERCARD/VISA Number \_\_\_\_\_ 3-Digit CVC/CVV Code \_\_\_\_\_  
(WE DO NOT ACCEPT AMERICAN EXPRESS OR DISCOVER)

Card Holder's Name: \_\_\_\_\_ Card Exp. Date: \_\_\_\_ / \_\_\_\_  
(PLEASE PRINT)

Billing Address for Card: \_\_\_\_\_  
ADDRESS / CITY / STATE / ZIP

I, \_\_\_\_\_, hereby authorize Marina Village to collect the scheduled deposit. I understand that this deposit is in accordance with a separate written agreement with contracting parties to the event identified in this application. I also acknowledge that the deposit is subject to liquidated damages and that if the event is canceled or held as scheduled, the deposit may not be fully refundable, per the terms of the agreement. I acknowledge as the credit card holder, that this payment is an irrevocable gift to the contracting party, as defined above, and as credit card holder, I agree that any potential recourse for any refunds or damages will be sought with the contracting party holding the event and in no way whatsoever, will Marina Village be responsible for any claims between the credit card holder and the contracting party conducting this event.

\_\_\_\_\_  
CARD HOLDER'S SIGNATURE