MAHOGANY

HOMEOWNERS ASSOCIATION

Please complete and return this request to the MHOA Bookings Team

Email: bookings@mahoganyhoa.com 29 Masters Park SE, Calgary, AB T3M 2C1 Phone: (403) 453-1221 Ext. 12

		Main I	Details		
Date Requested:	Booking Sta	art Time:	Booking End Time:	Actual Ever (Start to En	
Type of Event:					
Name of Renter:					
Phone Number:				Mahogany	Resident?
				Yes	No
Address of Renter:				·	
Email Address (for Invoi	ce to be sent	to):			
		Facility R	equested		
Mahogany	Mag	nolia	Mercado	Ma	rquis
Banquet Hall	Ro	om	Room	Sti	udio
(up to 200 Guests)	(up to 60	O Guests)	(up to 60 Guests)	(up to 3	35Guests)
Marine		Nat	ural	Meditati	ion
Studio			theatre	Garde	
(up to 35 Guests)	(Outdo				
		Package F	Requested		
Wed	lding	-	<u>-</u>	Birthday	
Mini			With Gym		
Basic			With Skatepark		
Enhanced			With Outdoor Rinl	k	
Ultimate					
Number of Guests attending:			Will you be serving alcohol? Liquor license & Lia	Yes	No re required
Will you be playing music? SOCAN & Re:Sound Fees	Yes	No	Will there be music with dancing? SOCAN & Re:Sound Fees apply	Yes	No

		Inventory	Requested			
Number of		Round Tables		Rectangle Tables		
Chairs		(5ft in diam	eter, Seat 8)	((6ft x 2.5 ft, Seat 6)	
		Additiona	l Requests			
	Fees	s may apply (see F	acility Booking Ra	ites)		
Sound			Podium			
System			Podium			
Additional			Small Rectangle	Table		
Microphone			(4ft x 2 ft)		
Projector			Cocktail Tab	ole		
Projector			Coat Rack w	rith		
Screen			Hangers			
TV Screen						
(55" or 65")						
		Additiona	l Services			
	Fe	ees apply (see Fac	cility Booking Rate	s)		
Post-Event Cleaning						
Mandatory for events with over 60 guests attending and/or ending after 9.30pm.						
After-Hours Security						
For events ending after 9.30	Opm, until	1.00am maximum				
Overnight Storage						
Items must be collected at 9	9.00am sh	arp the next day				
	Autho	rization and A	Agreement to	Terms		
I understand that the abo	ove infor	mation is only a re	equest and subjec	t to a firs	st come, f	irst served
basis and dependent on availability.						
I will make the required payment and return a complete Rental Agreement within 48 hours of						
receiving the invoice (via email) to secure my hooking. Lunderstand that failing to do so will						

receiving the invoice (via email) to secure my booking. I understand that failing to do so will				
potentially result in losing my requests as listed above.				
Renter's Name	Signature	Date		

MHOA STAFF USE ONLY				
Received By (Name):		Date Received:		
Processed By (Name) :	Date Processed:	Invoice No.		