

**Blair Farm Homeowners Association
Waiver/Release of Liability Form
Use of Blair Farm Clubhouse ONLY.**

Homeowner or Leaseholder Name: _____

Homeowners Address: _____

Contact Number: _____

Email Address: (Required) _____

Date _____ Time Needed: From: _____ To: _____

Anticipated number of Guest (no more than 70 per fire code in clubhouse):__

Waiver/Release of All Claims

I, _____, being of lawful age, agree to take responsibility for the above event/activity and do hereby fully and unconditionally discharge, release and agree to hold harmless Blair Farm Homeowners Association and their representative agents from any and all claims of any nature which may arise and/or fees that Blair Farm Homeowners Association may incur as a result of any claim of any nature directly relating to my use of the clubhouse and/or the activity/event described above. Use of clubhouse for any illegal manner or failure to adhere to the rules shall be cause to revoke clubhouse privileges until deemed otherwise by the HOA Board. I further state that I have carefully read the forgoing waiver/release and know the contents thereof, and I sign the same as my free act.

- **Key will not be issued more than 12 hours in advance of time requested.**
- **Assigned Key/Booklet is to be returned within 24 hours of close of event. Key Booklet may be placed on Managers front porch in white mailbox.**
- **Authorized person is family member living in Blair Farm of legal age (21 yrs.) and with signed consent of homeowner/(leaseholder- by-permission).**
- **Lessee MUST be a Homeowner and be present at event**
Homeowner may not reserve BF facilities to outside Group or "for profit" use without the expressed permission of the BF Board.
- **No alcohol is allowed in the clubhouse, on clubhouse grounds, or on any Blair Farm common area**

I have read and fully understand the Blair Farm Clubhouse Rules/Regs.; including clean-up requirement.

Homeowner/Leaseholder Signature: _____

Return to:

Pam Anthony, Clubhouse Manager

Email: blairfarmhoanc@gmail.com

1701 Teal Ct, Morehead City, NC 28557 (252)-646-3521

Manager Use:

Check Number/Date Received: _____.

Facility Inspected: Prior _____ After: _____

Key-Booklet Assigned ___#_____

Key Booklet Returned on time ___Y/N___ Check returned or Destroyed per Homeowner