

Reservation Taken By: _____ Date: _____

FlorenxiaSM

AT THE COLONY GOLF & BAY CLUBSM

23850 Via Italia Circle • Bonita Springs, FL 34134

Guest Suite Reservations

Unit# _____ Owner Name: _____

I take full responsibility for the guest suite and the facilities (amenities) that I am reserving and for each person that is my guest.

Any damages, repairs, extra cleaning will be reported in writing and billed to me. I will pay for all afore mentioned items immediately upon receipt with out argument or fail.

I am fully aware of the rules and regulations regarding the building, guest suites and its facilities. I take full responsibility to see that I and all my guests abide by them as well.

Guest will park in the Guest parking and North parking lot only. At no time may a guest or owner park in the driveway or circular drive or in front of or near the building door entrance.

Unit Owner Signature

Date

Information below must be completed in FULL before keys can be released.

Date: Check-in

Date: Check-out

- Villa Medici

- Grand Minerva

of guests _____

Guest Names: _____

Car Make: _____ Car Model: _____

Car Color: _____ License Plate#: _____

Home Address and Telephone Number: _____

Keys Given By: _____ Date: _____

Received By: _____ Date: _____