



Guest Registration

This form must be filled out and approved at least 3 days in advance of your Guest(s)' arrival.

Resident Name: _____

Unit # _____

Name of Guest(s):

Guest Contact Number: _____

Length of Stay: From _____ Through _____

My signature below indicates that I have read and understand all of the rules and regulations set forth and I have imparted these rules and regulations to my guest(s) in full and on behalf of my guest(s) agree to abide by them. In addition my guest(s) will be introduced to the Venu Concierge Staff to ensure a complete understanding of the Great Room's rules and regulations. No exchange of money will take place between an owner/resident and guest, as that would constitute a rental. I further understand that the actions of my guest(s) in all circumstances and under all conditions are ultimately my responsibility and I agree to be held responsible.

By signing below I also agree that my guests will be included in the liability disclaimer I have on file with the Venu.

Signature of Resident

Date