

Dear Applicant,

Welcome and thank you for your interest in holding your Event and/or Program at Los Compadres.

The following requirements must be met, along with your completed application, in order for your application to be accepted and the date of Event/Program reserved.

The responsible party, the person who signs the contract, must provide a **Certificate of Insurance Coverage** for the following to be included with the application:

- **Proof of Personal Liability Insurance** with a minimum of \$500,000.00 naming Los Compadres as the additional insured.
- **Proof of Liability Insurance.**
- **Proof of Workman Compensation Insurance** (for caterer and entertainment).

Enclosed please find the **Los Compadres Rental/Certificate of Insurance Agreement** to be completed and returned to Los Compadres, 1849 El Cielo, Palm Springs, CA 92264

We would appreciate **two separate checks**, made **Payable to Los Compadres Inc.**

- **First** in the amount of \$600.00 for Club Rental
- **Second** in the amount of \$200.00 for Cleaning/Security Deposit (refunded if premises are left clean and without damage).

Capacity is limited: No more than 100 people attending any Event/Program.

We are confident that you will enjoy your Event/Program here at Los Compadres. To reserve a date(s) or if you have any questions, please contact **Randy Agor**, 1st Vice-President at **760/325-2526**.

Los Compadres Board of Directors

Los Compadres
1849 El Cielo Road
Palm Springs, CA 92264

Los Compadres Rental/Certificate of Insurance Agreement

Today's Date: _____ Rental Date(s): _____

Date Application given/mailed to Applicant/Group: _____

Date Application, Rental Fee and Cleaning/Security Deposit received: _____

Applicant/Group Name: _____

Responsible Party/Person in charge: _____

Mailing Address: _____

E-mail Address: _____

Daytime or Mobile telephone: () ___ / ___ - ___ Home telephone: (___ / ___ - ___

Type of Event/Program: _____ Hours of Event/Program: _____

Set-up Date & Time: _____ Clean-up Date & Time: _____

Estimated Attendance: _____

**Rental/Cleaning/Security Fees must be received before the Clubhouse will be reserved.
Please submit Payment checks payable to: Los Compadres Inc.**

Club Rental Fee: \$600.00

Cleaning/Security Fee: \$200.00

A \$200.00 Cleaning/Security Deposit is required and must be paid when this application is submitted. This deposit is refunded upon inspection of the premises after your Event/Program and if the premises are satisfactorily clean and without damage.

Los Compadres
1849 El Cielo Road
Palm Springs, CA 92264

Los Compadres Rental/Certificate of Insurance Agreement

Today's Date: _____ Rental Date(s): _____

Date Application given/mailed to Applicant/Group: _____

Date Application, Rental Fee and Cleaning/Security Deposit received: _____

Applicant/Group Name: _____

Responsible Party/Person in charge: _____

Mailing Address: _____

E-mail Address: _____

Daytime or Mobile telephone: () ___ / ___ - ___ Home telephone: (___ / ___ - ___

Type of Event/Program: _____ Hours of Event/Program: _____

Set-up Date & Time: _____ Clean-up Date & Time: _____

Estimated Attendance: _____

**Rental/Cleaning/Security Fees must be received before the Clubhouse will be reserved.
Please submit Payment checks payable to: Los Compadres Inc.**

Club Rental Fee: \$600.00

Cleaning/Security Fee: \$200.00

A \$200.00 Cleaning/Security Deposit is required and must be paid when this application is submitted. This deposit is refunded upon inspection of the premises after your Event/Program and if the premises are satisfactorily clean and without damage.