



Guest Apartment Reservation Form/Agreement

The guest apartment located at: _____ is being reserved by

_____ (resident name)

_____ (resident address)

for the following dates _____. The minimum stay is 5 nights. The daily rental rate is \$99.00 and must be paid by check or money order when the keys are picked up for the guests stay. Daily housekeeping is not included in the rent. However, cleaning and laundering of all linens is done between guests.

The guest apartment is a non-smoking apartment. Please make sure your guests are aware of this. Guests are expected to abide by all the rules and regulations of the Gardens on Prairie Rose management. A copy of the rules is available in the guest apartment.

Fines up to \$200 may be assessed for breaches of the peace. Damage to property or creating a nuisance or danger will revoke privileges for a period to be solely determined by management.

Owner or Management reserves the right at any time to change or rescind one or more of these rules and regulations or to make and enforce such other reasonable rules and regulations as in Owner's judgment may be deemed advisable to promote the safety, care, and cleanliness of the premises and for preservation of good order.

Upon leaving, please make sure all lights are turned off, stove is off, and that all doors are locked. Should you have an emergency, you may contact us after hours at 815-742-0006.

The apartment keys should be returned to the office no later than 11 a.m. on the date of departure.

I have read and agree to abide by all rules and regulations.

Signature

Address

Date

Date Reservation Received: _____

Approved By: _____

Amount Received: _____ Check #: _____ Date: _____

The Gardens on Prairie Rose

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