

CURRENT COST OF PERMIT: \$75.00 (Rate Approved 6-1-2016)

**PERMIT FOR GROUP GATHERING
TRAIL'S END HOMEOWNERS ASSOCIATION, INC.
T. L. SMITH PARK**

MEMBER:	ADDRESS:	
CITY:	STATE:	ZIP:
TRAILS END LOT NUMBER	DAYTIME PHONE	
	EVENING PHONE:	
DEPOSIT AMOUNT:	NUMBER OF GUESTS:	
PERIOD OF PERMIT: Beginning Date, Hour:	Ending Date, Hour:	

I hereby release Trails End Homeowner's Inc., its officers and members, from liability for any accident or injury to myself or my guests.

I have read and understand the rules of the Association and the park rules and agree to abide by those rules. Further, I agree to reimburse Trails End Homeowners Association Inc. for (1) any and all damages assessed by TEHOA for actions by myself or my guests during the period of this permit and (2) any and all monetary damages assessed against the association member to cover the full cost of repair or the estimated/assessed cost of damage, even if no repair is completed. I will contact a member of the Board and accompany that person for a physical inspection of the premises within 24 hours of the expiration of the permit. I understand that my deposit will be refunded upon successful completion of the inspection, provided there are no damages or repairs necessary to restore the property to its original state, and there has been no violation of Park or Association Rules. NOTE: I hereby understand that any disturbance caused by my gathering could result in a call being made to the Travis County Sheriff's Office for action. I hereby understand that violations of the Park Rules by any of my guests could result in the revocation of my TEHOA membership. The entry gate of the park will remain operational at all times and not be left open.

I certify that I am a member in good standing of the Trails End Homeowners Association.

(Member's Signature)

(Date Issued)

AUTHORIZED BY: _____ **DATE:** _____