

COQUINA CLUB OF NAPLES INC.

Lessee Guest Registration Form

(Guest occupancy during Lease Term)

START DATE: _____ END DATE: _____ UNIT # _____

OWNER NAME _____ LESSEE NAME _____

Guests _____

CELL NUMBER _____

ADDRESS _____

RELATION TO RENTER _____

VEHICLE MAKE/LICENSE _____

LESSEE EMAIL ADDRESS _____

The undersigned, being the owner of the subject unit hereby confirms:

1. I have furnished the Guest with a copy of the Association's Rules and Regulations. _____
(initial)
2. I understand I am responsible for the conduct and actions of the Guest as it relates to the Association's Rules and Regulations. _____(initial)
3. **I understand this type of occupancy is restricted to twice during each lease period. The duration of the Guest's visit is limited to 1 day to 14 days and a period of at least 7 days must elapse between guests.** _____(initial)
4. **I understand that Guests of the Lessee are not permitted in the unit without the Lessee being present.** _____ (initial)

Owner: _____ Lessee: _____
Name _____
Signature _____

Sent to Board of Directors _____ Sent to On Site Manager _____
Date Date