



AOAO KANALOA AT KONA

NOTICE OF RESERVATION FORM & ACKNOWLEDGMENT OF HOUSE RULES/GATE CARD

PLEASE EMAIL COMPLETED RESERVATION FORM AS REQUIRED BY HOUSE RULES #1 UNDER 'PROPERTY ACCESS AND USE'
 TO: KAK-RES@CASTLERESORTS.COM AT LEAST TWO (2) DAYS PRIOR TO ARRIVAL

RESIDENT / GUEST	
NAME:	
PHONE:	
EMAIL:	
OWNER USE:	CHECK BOX IF IMMEDIATE FAMILY (Owner, Spouse, Sibling, Child, Parent Only)
ARRIVAL:	
DEPARTURE:	
UNIT NUMBER:	
CHECK-IN TIME:	

AOAO KANALOA HOUSE RULES

All owners, rental agents, residents, and guests are obligated to abide by the **House Rules** at all times. Prompt action will be taken for any violations of these rules. The information on this form will be maintained by the Association and used for emergency and property management purposes only.

I have been presented with the AOA Kanaloa House Rules and acknowledge receipt as indicated below. Further I have been presented with one (1) gate card and acknowledge that if it is not returned to the front desk upon check-out, a **charge of \$30 plus tax will be applied to my credit card on file.**

X _____
 Resident / Guest Signature

OWNER / RENTAL AGENT	
NAME:	
CONTACT PHONE:	
EMAIL ADDRESS:	

CAR INFORMATION FOR PARKING	
LICENSE PLATE #:	
CAR MAKE /MODEL:	
CAR COLOR:	

Persons to be registered to the apartment if other than those listed above:

NAME:		NAME:					
NAME:		NAME:					
IF EMERGENCY, CALL:		RELATIONSHIP:					
		PHONE:					
DATE ISSUED	# OF KEYS	ISSUED BY	DATE RETURNED	# KEYS RETURNED	RECEIVED BY		
FEE BILLED TO OWNER		FEE BILLED TO AGENT		OWNER USE		FEE TO BE CHARGED TO GUEST BY CC	

KEYS ISSUED