

Suite Rental Guidelines

We hope you enjoy your stay and want you to feel comfortable during your time in the suite.

We have a few guidelines that we ask you to follow:

- 1. No smoking Smoking is not permitted anywhere in the facility and must be a minimum of 8 meters from the entrance. (Fine \$250 for smoking in room).
- 2. Parking Guest(s) is provided with one parking pass, please ensure it is displayed.
- Payment Payment in full is required upon check out. If staying longer than two (2) weeks/ 14 days we require a minimum, bi-weekly payment, unless we are directly billing a third party.
- 4. Check In- Ensure to confirm check in time at least 24 hrs prior to arrival. If check in time is past 3:00 pm or on weekends, arrangements can be made to pick-up key with security.
- 5. Check out We understand with appointments and medical reasoning tenant may be able to leave earlier than the original check out. You must provide 24 hrs notice of check out, or a charge may occur. If an extension is needed, please let us know as soon as possible so we may try to accommodate.
- 6. Guest is responsible for any visitors in the suite. Visitors must sign in/out of the building each time they visit. If they are parked in the parking lot, they must register their vehicle.
- 7. Lions Foundation shall not be liable or responsible for any loss of, damages or injury to any guests' personal property. Lions Foundation is not responsible for any tickets or towing which may occur.

320 Sherbrook St., Winnipeg, MB R3B 2W6 Phone: 204-772-1899 / 204-784-1650 / Email: info@lionsfoundation.org www.LionsFoundation.org





LIONS FOUNDATION of Manitoba & Northwestern Ontario

- 9. Please quickly bring to our attention any damages or appliances not in working order. Guests may be held responsible for any damages that occur during stay.
- 10. We want you to enjoy your stay, please let us know if something is missing from your suite.

*Completed by Main Guest

#1 Guest Name	#2 Guest Name	
Address (number & street name)	(town/city)	(postal code)
(cell) Phone #		(other)
Check in date (dd/mm/yy)	Check out date (dd/mm/yy) approx.	
License Plate #	stand in the event the t	erms are broken I m

I agree to the above guidelines and understand in the event the terms are broken I may be required to leave.

_____ (signature)