

CORPORATE QUARTERS, INC. - HOUSING APPLICATION

Please complete information and return with photos & diskette of property (interior & exterior) if not already on file.

CATEGORY (check one): House Condo Apartment Room(s) Only Subdivision: _____

Last Name _____ First Name _____ MI _____ Social Security No. _____ Spouse Name _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ His Work Phone _____ Her Work Phone _____ Fax _____ Miles to Course _____

Your Email Address _____ Spouse's Email Address _____

Listed in the past with us? (when) _____ Smoking Allowed Inside? Yes No

Do you have pets in your home? Yes No If yes, type of pet? _____

Approximate Square Footage _____ Breakfast table seats _____ Dining Table Seats _____

Description of home/condo _____

BEDROOMS / BATHROOMS	Bedroom	Size bed	Main Floor	2nd	Other	Full Bath	Shared	Sep. Vanity
_____ Bedrooms	Master	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ Full Baths	#2	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ Half Baths	#3	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ Bonus Room	#4	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ Total Beds	#5	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	#6	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

AMENITIES

- | | | | | | |
|---|---|--|--|---|---------------------------------------|
| <input type="checkbox"/> Pool | <input type="checkbox"/> Pool Table | <input type="checkbox"/> Computer | <input type="checkbox"/> Wireless Internet | <input type="checkbox"/> Patio | <input type="checkbox"/> Bigscreen TV |
| <input type="checkbox"/> Pool House | <input type="checkbox"/> Ping-Pong Table | <input type="checkbox"/> Fax | <input type="checkbox"/> Wetbar | <input type="checkbox"/> Gas Grill | <input type="checkbox"/> VCR |
| <input type="checkbox"/> Rear Cottage | <input type="checkbox"/> Foosball Table | <input type="checkbox"/> Internet | <input type="checkbox"/> Tennis Court | <input type="checkbox"/> Charcoal Grill | <input type="checkbox"/> DVD |
| <input type="checkbox"/> Gazebo | <input type="checkbox"/> Dart Board | <input type="checkbox"/> Printer | <input type="checkbox"/> Hardwood Floors | <input type="checkbox"/> Double Ovens | <input type="checkbox"/> Piano |
| <input type="checkbox"/> Sunroom | <input type="checkbox"/> Basketball Hoop | <input type="checkbox"/> Copier | <input type="checkbox"/> Garage Parking | <input type="checkbox"/> Gas Cooktop | _____ No. of Phone lines |
| <input type="checkbox"/> Screened Porch | <input type="checkbox"/> Exercise Equip. | <input type="checkbox"/> Cable | <input type="checkbox"/> Deck | _____ No. of fireplaces | |
| <input type="checkbox"/> Hot Tub | <input type="checkbox"/> Golf Course View | <input type="checkbox"/> Digital Cable | | _____ No. of TVs | |
| | <input type="checkbox"/> Pond/Lake View | <input type="checkbox"/> Satellite | | | |

Other: _____

If your home qualifies would you allow your home to be used as a host home? Yes No Dinner Home? Yes No

Desired Rental Rate \$ _____ Host Home \$ _____ Dinner Home \$ _____ *Extra Night \$ _____

Rental rates must include seven percent (7%) commission and maid service.

* Extra night: This rate usually applies to last minute additions, please enter a rate ONLY if you're flexible to rent your home for extra night(s).

Date & Time Available: From _____ To _____

Provide Maid Contact Information (Name & Phone #): _____

If you have a small floor plan and directions to your home from the Airport, Augusta National, Interstate 20, etc., it is most helpful.

Emergency person in town during the tournament:

Name: _____ Relationship: _____ Telephone: _____

The information which you provide to Corporate Quarters about your property will be furnished to prospective renters. YOU WILL BE HELD RESPONSIBLE FOR ANY INACCURACIES IN THE INFORMATION YOU PROVIDE. This rental is at your own risk.

Signature _____

Date _____