

Vacation / Short-Term Rental Agreement

Bistro Slate

Please review and complete the following agreement to ensure a smooth and enjoyable stay.

PARTIES

Host / Owner

Guest Name

Property Address

DATES & SCHEDULE

Check-in Date

Check-out Date

Check-in Time

Check-out Time

TERMS & PAYMENT

Nightly Rate (\$)

Number of Nights

Cleaning Fee (\$)

Security Deposit (\$)

Max Occupancy

OPTIONS

No Smoking Agreed

No Parties Agreed

SIGNATURES

Host Signature

Signature / date

Guest Signature

Signature / date