

## Forest North CIA 2023 Pool Registration

Resident Information

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DATE: \_\_\_\_\_

NAME/OWNER: \_\_\_\_\_

OWN: Yes No

LEASE: Yes No

RESIDENCY VERIFICATION: \_\_\_\_\_

HOA FEES PAID: YES NO

AMOUNT DUE: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

CLEARED BY: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

4 and under Free

5-13 (ORANGE)

14-16 (GREEN)

ADULT (YELLOW)

Please List all family members that are requesting Pool access:

NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_ \$ 5 \$10 **O G Y** \_\_\_\_\_NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_ \$ 5 \$10 **O G Y** \_\_\_\_\_NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_ \$ 5 \$10 **O G Y** \_\_\_\_\_NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_ \$ 5 \$10 **O G Y** \_\_\_\_\_NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_ \$ 5 \$10 **O G Y** \_\_\_\_\_NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_ \$ 5 \$10 **O G Y** \_\_\_\_\_NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_ \$ 5 \$10 **O G Y** \_\_\_\_\_NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_ \$ 5 \$10 **O G Y** \_\_\_\_\_NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_ \$ 5 \$10 **O G Y** \_\_\_\_\_

\$ 10 per adult 17 yrs of age and older

Total Due: \_\_\_\_\_

\$ 5 per child/youth 5-16 years old **5-14 MUST BE WITH ADULT**

Check # \_\_\_\_\_

Children 4 Free and under – **MUST BE WITH PARENT AT ALL TIMES**

Cash: \_\_\_\_\_

Emergency contact: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I have received a copy of the 2023 Pool Rules and Guidelines. I understand that FNCIA, the Board of Directors, the Pool Management Company, or the HOA Management Company shall not be held liable for any injury, accident, or loss in connection with use of the Pool.

Upon arrival present pass to the Life Guard. Upon leaving, pass will be returned if no discipline action was needed. If not returned, Homeowner and/or participants are required to discuss the incident with a Board of Directors member.

Homeowner/Renter Signature: \_\_\_\_\_ Date: \_\_\_\_\_