

**ORCHARDS AT GREENTREE  
HOMEOWNER'S ASSOCIATION**

**2010 RECREATION PASSES/AUTHORIZATION FORM**

*This form must be fully completed in order to receive pool bands.*

**UNIT ADDRESS:** \_\_\_\_\_

**UNIT OWNER:** \_\_\_\_\_

IS UNIT LEASED/RENTED: \_\_\_\_\_  
*(If so, attach a copy of the lease)*

**MAILING ADDRESS** *(If different then unit #):*  
\_\_\_\_\_  
\_\_\_\_\_

**CONTACT INFORMATION**

For Owner:  
Phone: (H) \_\_\_\_\_  
(W) \_\_\_\_\_  
Email: \_\_\_\_\_

<u>Office Use</u>	
Unit # _____	
<b>Assigned wristbands</b>	
<b>Color</b>	<b>Assigned#</b>
_____	_____
_____	_____
_____	_____
_____	_____

<b>Emergency Contact #</b>
Name: _____
Relation: _____
Number: _____

Tenant (if applicable):  
(H) \_\_\_\_\_  
(W) \_\_\_\_\_

PLEASE COMPLETE THE SECTION BELOW FOR ALL PERSONS RESIDING IN THE UNIT, INCLUDING THE UNIT OWNER. **RECREATION BANDS WILL NOT BE ISSUED WITHOUT THIS INFORMATION.**

UNIT OCCUPANT: _____	AGE: _____
UNIT OCCUPANT: _____	AGE: _____
UNIT OCCUPANT: _____	AGE: _____
UNIT OCCUPANT: _____	AGE: _____

VEHICLE TAG # (s) REGISTERED TO UNIT: \_\_\_\_\_

ALL OCCUPANTS IN THE ABOVE ADDRESS HAVE READ THE POOL RULES AND REGULATIONS AND HAVE AGREED TO ABIDE BY THEM.

IT IS THE RESPONSIBILITY OF THE HOMEOWNER TO FORWARD THE POOL RULES TO HIS TENANT.

ALL OCCUPANTS USING THE POOL WILL DO SO AT THEIR OWN RISK. THE ASSOCIATION WILL NOT BE HELD RESPONSIBLE FOR INJURIES/ACCIDENTS OR DAMAGE TO PERSONAL PROPERTY.

ALL MEMBERS ARE RESPONSIBLE FOR THE ACTIONS OF THEIR GUESTS.

SIGNATURE OF UNIT OWNER \_\_\_\_\_



Please check box if your tenant has your permission to pick up these passes?