

Deer Creek Village

Homeowners Association
c/o Alton, LLC
2731 S. I-35 Service Rd., Moore, OK 73160
(405) 366-0000

Deer Creek Village Community Fitness Center & Pool Card Application

Please type or print information legibly. *All Fields Are Required*

Homeowner

Last Name: _____ First Name: _____
Street Address: _____ Edmond, OK 73013
Primary Phone: _____ Alternate: _____
Primary E-Mail Address: _____
Alternate E-Mail Address: _____

Additional Household Members: (Only persons residing at this address)

Name _____ DOB _____
Name _____ DOB _____
Name _____ DOB _____
Name _____ DOB _____

The Clubhouse Rules, Pool Policies and Fitness Room Rules can be found at the DCV website

<http://www.deercreekvillage.com/resources.html>

Replacement Card: Yes No If Yes, Card # being replaced: _____

Reason for Replacement: _____

Pool Card Replacement Fee: \$45.00 Please Submit Replacement Card Fee Payment online at www.duespayment.com – Customer Sign-In – Returning User or Set Up Account - Deer Creek Village HOA.

Please contact Deer Creek Village HOA at (405) 366-0000 with any questions when submitting online payments or for help setting up an account

I do hereby assume all risk of injury to myself or to my household family members and my guests and absolve and hold harmless Deer Creek Village Homeowners Association, Inc. and all of their employees, officers, and administrators, from any, and all, claims for losses, injuries, and/or consequential damages including attorney fees. I am aware that swimming is a strenuous activity with some inherent dangers and risks. I acknowledge that I have read, understand and agree to all Deer Creek Village Fitness Center & Pool Rules, Policies, and Procedures. I agree that if any of the information listed on this form changes, I will notify Deer Creek Village HOA immediately.

Homeowner's Signature: _____ Date: _____

Please return the completed form with attached required proof of residency (any document with your name and Deer Creek Village home address on it), and copy of DuesPayment Receipt with Confirmation # for Replacement Card Fee: (1) deliver form to Jim Burkett at DCV Model Home; or (2) email form to jim@westpoint-homes.com. Upon receipt of completed form & receipt copy with confirmation # for appropriate fee, we will contact you to schedule date & time to receive your pool card.

Completed by Authorized HOA Board Member or Representative Only

Date Application Received: _____ Proof of Residency: _____
Approved: _____ By: _____ Card # _____ Code # _____
Issued On _____

Online: www.duespayment.com Confirmation #: _____ Date: _____

Replacement Card: Yes No If Yes, Card # being replaced: _____

I acknowledge receipt of: Card # _____ With Card Code _____ and understand only one (1) card per household and if a replacement card, original card issued will be deactivated.

Homeowner's Signature: _____ Date: _____