

2024 Pool Pass Information & Instructions

YOUR FORM MUST BE E-MAILED OR MAILED IN BY MAY 1st 2024 PASS REQUESTS WILL NOT BE ACCEPTED AT THE POOL

Please fill out the form on next page and mail to:

Ashton Woods Owners Association, P. O. Box 1364, Chesterfield, VA 23832

If sending electronically, please e-mail form to: <u>ashtonwoodspooldirector@gmail.com</u>

<u>If this is a rental property</u>, a letter from the Homeowner granting permission for their tenants to use the pool must accompany this form. Pool Passes are issued to either the Homeowner or the Renters. Not both. This decision is fully at the discretion of the Homeowner.

Association Dues MUST be current for passes to be issued. Arrangements must be made in advance to pay any past due balance prior to sending in this form. We will not accept any payments at the pool.

Every lot is entitled to pool passes for individuals **that reside at that residence**. Each each lot will receive one (1) Guest Pass for repeated use the entire pool season. It is limited to bringing in only one (1) guest per day. Additional guests must pay a \$5 fee per guest.

Proof of residency MUST be provided with this form. Proof of Residence can be a copy of a Virginia Driver's License or copy of a recent Utility Bill. Please send in a copy of Proof of Residence for every adult member that lives at the residence that you are requesting passes for. The residential address MUST match the address on file. No exceptions. Any child residing at your property that is or will be 18 during the swim season will be required to provide proof of residency.



2024 POOL PASS REQUEST FORM

THIS FORM MUST BE RECEIVED BY MAY 1ST 2024

YOU MAY EITHER MAIL IT TO OUR PO BOX OR EMAIL IT TO: ashtonwoodspooldirector@gmail.com

Our passes are ELECTRONIC. Paper passes <u>will not</u> be issued. Once your information is verified you will receive instructions via email as to how to access your passes.

PLEASE PRINT CLEARLY

| PROPERTY ADDRESS | | |
|------------------------------------|---------------|---|
| ADULT HOMEOWNER ON DEED | | |
| 2nd ADULT HOMEOWNER ON DEED | | |
| Phone Number (to access the App) | | |
| E-mail Address (to access the App) | | |
| NAME(S) OF ADDITIONAL A | ADULTS & CHIL | DREN LIVING IN THE RESIDENCE |
| Name | DOB | Proof Of Residence Attached? |
| Name | DOB | Proof Of Residence Attached? |
| Name | DOB | Proof Of Residence Attached? |
| Name | DOB | Proof Of Residence Attached? |
| e e | | ing this I am confirming that all information above dults over 18 or children who will be turning 18 |
| SIGNATURE | | DATE |