Plantations Two Community Association, Inc.

OUTSIDE Pool Membership Information Sheet

*Please print or type. **ALL** information must be completed to process your pass(es).*

Pass ID Number (completed by HOA Pool Committee): _____

Type of Pass, please check one: ☐ Pass Renewal
☐ New Member Issue

Member's Last Name(s): _____

Street Address: _____

Phone(s): Home: _____ Cell(s): _____

E-mail (for communication purposes only): _____

POOL ACCESS TAGS will be *reactivated* for the upcoming season *upon receipt* of your *updated* Pool Membership Information Sheet. If lost or misplaced, new pool access tags are available for a fee of $10 each**,** and can be purchased at the pool during the pool season (payments may be made online at www.plantationstwo.com). New members receive their first pool access tags for free.

List the names of **all adults** who are ***residents*** of your household and should receive a pool pass. An adult is anyone over 18 prior to the beginning of the pool season. *Note: Proof of residency can be requested.*

First & Last Name	*First & Last Name*

List names and date of birth for **all children under 18** who are **residents** of your household. A child 12 or older may be admitted to the pool unaccompanied by an adult if he/she has a parent's written permission (mark below).

First and Last Name of Children Under 18	*Date of Birth*	*Age 12+ Permission to Attend Pool Unaccompanied by Adult*
		Yes ☐ or No ☐
		Yes ☐ or No ☐
		Yes ☐ or No ☐
		Yes ☐ or No ☐
		Yes ☐ or No ☐
		Yes ☐ or No ☐

I have read and understand the Plantations II swimming pool rules/operating policy (available online at www.plantationstwo.com). *I also give my permission for the above named children 12 or older, if any, as indicated above*, to be admitted to the pool unaccompanied by an adult after they have passed any necessary swim test administered by the Pool Manager.

Member Signature: _____ Date: _____

In Case of Emergency Contact the Following Person(s)

For Adult Pass(es):

Name: _____

Phone: _____

For Children's Pass(es):

Name: _____

Phone: _____