

## AMENITIES REGISTRATION FORM 2019

<b><u>ADDRESS:</u></b>
------------------------

Homeowner Information	PLEASE PRINT
Owner:	Phone:
Owner:	Phone:
Email:	
Email:	
<b>Emergency Contact:</b>	Phone:

### Children Living in the Home

Name:	Age:
Name:	Age:
Name:	Age:
Name:	Age:

### Other Persons Living in the Home

#### Check One:

Name:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Tenant ***	Family Member	Other: _____
Name:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Tenant ***	Family Member	Other: _____

**\*\*\* Please complete a Residential Occupancy Form for your tenant. Forms can be found online at [www.countryside-va.com](http://www.countryside-va.com).**

**NOTE:** For new or replacement passes, you will need to come in to the Proprietary Office. Replacement passes are \$10.00 each. **Be prepared to provide identification for all passes requested.** Acceptable identification includes a government issued ID or driver's license, indicating your current CountrySide address, or a photo ID and a utility bill indicating your name and CountrySide address. For children 2 and older, parents will need their documentation and an insurance card, medical bill, birth certificate, or passport with the child's name.

***I hereby agree on behalf of myself, my family, and our guests to abide by all the rules and regulations of the pool(s) as adopted by the CountrySide Board of Directors. I also understand that the use of the pool(s) will be suspended if my homeowner's dues are in arrears. A DRC violation may also result in the suspension of use of the pool(s).***

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_