## AMENITIES REGISTRATION FORM

ADDRESS:		
Homeowner Information	PIEASE PRINT	
Owner:	Phone:	
Owner:	Phone:	
Email:		
Email:		
Emergency Contact:	Phone:	
Children Living in the Home		
Name:		Age:
Other Persons Living in the Home Check One:		
Name:	Tenant *** Family	Member Other:
Name:	Tenant *** Family	Member Other:
*** Please complete a Residential Occupancy Form for your tenant. Forms can be found online at www.countryside-va.org		
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. Iakso 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:	Office Use Only

5 + LIST: \_\_\_\_\_