

## AMENITIES REGISTRATION FORM

|                 |  |
|-----------------|--|
| <b>ADDRESS:</b> |  |
|-----------------|--|

**Homeowner Information**

**PLEASE PRINT**

|                    |        |
|--------------------|--------|
| Owner:             | Phone: |
| Owner:             | Phone: |
| Email:             |        |
| Email:             |        |
| Emergency Contact: | 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"/> | Tenant *** | <input type="checkbox"/> | Family Member | <input type="checkbox"/> | Other: _____ |
| Name: | <input type="checkbox"/> | Tenant *** | <input type="checkbox"/> | Family Member | <input type="checkbox"/> | Other: _____ |

\*\*\* Please complete a Residential Occupancy Form for your tenant. Forms can be found online at <https://www.countryside-va.org>

*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 home owner'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: \_\_\_\_\_