



POOL PASS REGISTRATION FORM

Owner: _____

Address in Sawyer's Mill: _____

Alternate Address: _____
(if applicable)

Telephone: (h) _____ (c) _____

Tenant: _____
(if applicable)

NAMES OF ALL PERSONS RESIDING IN HOME:

<u>Name</u>	<u>Age</u>	<u>Key Fob Serial Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby certify that I am an owner/resident of Sawyers' Mill Owners' Association. I wish to register for the current pool season and do hereby agree to abide by the Pool Rules and Regulations of Sawyer's Mill Owners' Association. I further agree that I shall be responsible for the actions of all members of my household and guests. I also acknowledge that I as well as all persons who will be using the pool have read and will abide by all of the Sawyer's Mill Owners' Association Pool Rules and Regulations.

In the event of an emergency, a full report will be given to the Association Manager in writing.

If I notice any maintenance or other problems with the pool or the pool area that needs attention, I will contact the Manager.

Signature: _____ Date: _____