

ARBOR STATION HOMEOWNER SERVICES, INC. POOL USAGE AND PRIVILEGE AGREEMENT

Name: _____
 Property Address: _____
 Home Owner: Renter: / Landlords Name: _____

By signing below and in consideration for the privilege to use the ARBOR STATION HOMEOWNERS, INC. ("The Association") pool, I _____, acknowledge that I have received a copy of the ARBOR STATION POOL RULES and agree to follow said rules as outlined, and further agree as follows:

I understand if I, the person(s) listed below, or any guest or family member of mine using the pool DO NOT adhere to the rules outlined, my HOUSEHOLD, MYSELF and all said GUESTS and FAMILY MEMBERS will be subject to the LOSS of pool privileges. I understand that I may request the opportunity to express my position at the next meeting of the Association's Board of Directors following such suspension, or at such other time as the Board may (but is NOT REQUIRED) to agree to. Any such request will be made in written and submitted to a member of the Board. I acknowledge and agree that any Pool Monitors may also be called to such meeting for purposes as determined by the Association's Board.

Further, I hereby **AGREE to be solely and fully RESPONSIBLE for the following person(s) and any guests or other family members that may accompany me or one of my household members at the ARBOR STATION POOL FACILITY.** I understand that these individuals **MUST BE LIVING IN MY HOUSEHOLD** (under my roof for 6 - months out of the year), and I must be ready to authenticate such member at signing. In the event I am a resident of **PARKWOOD VILLAGE APARTMENTS** or I rent a home in ARBOR STATION, I will provide proof of residency. Proof may either be in the form of a lease agreement, utility bill, etc. Such members and their ages are as follows:

(6 PEOPLE PER HOUSEHOLD. IF MORE THAN 6, THERE IS AN ADDITIONAL FEE OF \$10.00 PER PERSON FOR THE FULL YEAR.)

FULL NAME:	AGE:
1	
2	
3	
4	
5	
6	

Further, I hereby agree to hold harmless and indemnify the Association, all members of its Board of Directors, and of their agents and assigns, including pool monitors, from any and all damages to person or property as to myself and all individuals for which I am responsible for as identified herein, for any and all acts and omissions of the Association, all members of its Board of Directors, and any of their agents and assigns except those resulting from intentional acts of said individuals. I agree to indemnify the Association, all members of its Board of Directors, and any of their agents and assigns, including pool monitors, in the event that any of my actions or those of individuals identified hereon causes (in whole or in part) a suit to be filed against, or a finding of liability to be made against said individuals. I acknowledge that the Association makes no warranty of fitness for use and that use of the pool by any individual including myself and all individuals mentioned or identified herein, is at said individual's own risk. I understand that any pool monitors are not lifeguards, and that the Association normally does not staff the pool with lifeguards. I assume all risk of liability for myself and other individuals mentioned or identified herein as regards use of the pool and related facilities, including the clubhouses and restrooms.

X _____ - _____ - _____
 (Signature) (Phone Number) (Date)

X _____
 (Print Name) (Email Address)

POOL MONITOR SECTION:

\$ _____ + \$ _____ + \$ _____ + \$ _____ = \$ _____
 HOA DUES LATE FEES POOL DUES KEY DEPOSIT TOTAL DUE

NUMBER OF KEYS: _____ / KEY NUMBER(S): _____ / _____ / _____ / _____

PAID BY CHECK: # _____ Pool Monitor Name: _____