



THE VILLAGES OF WELLINGTON



2012 POOL PASS APPLICATION & AGREEMENT

Requirements for residents who wish to use their pool privileges:

- ◆ Pay account balance to become member of good standing
- ◆ Complete this form for household adults over 18 & children with birthdate/age
- ◆ Primary contact adult must sign as agreement with pool rules

Address

**PLEASE
PRINT
CLEARLY**

Primary Contact Phone - Daytime

Email

My signature below certifies that the birthdates of children under age 18 are true to the best of my knowledge. I have read and agree that all household members and guests will comply with The Villages of Wellington Pool Rules.

PRINT PRIMARY ADULT NAME

Check here if applicant is authorized renter

Signed: _____

Date: ____ / ____ / ____ 2012

Owner name is: _____

Print Child Name	Date of Birth	Age
<input type="text"/>	/ /	<input type="text"/>

Print Child Name	Date of Birth	Age
<input type="text"/>	/ /	<input type="text"/>

Print Child Name	Date of Birth	Age
<input type="text"/>	/ /	<input type="text"/>

Print Child Name	Date of Birth	Age
<input type="text"/>	/ /	<input type="text"/>

Print Child Name	Date of Birth	Age
<input type="text"/>	/ /	<input type="text"/>

Print Child Name	Date of Birth	Age
<input type="text"/>	/ /	<input type="text"/>

**SUBMIT APPLICATION TO: Peak Properties, LLC, 11711 Hermitage Rd, Suite 7, Little Rock, AR 72211
Fax: 353-0398 ◆ Email: info@peakpropllc.com ◆ Phone: 353-0368**

THIS SECTION FOR MANAGEMENT ONLY: [] ACCOUNT PAID IN FULL as of _____
[] ACCOUNT NOT IN GOOD STANDING - Owes \$ _____ Paid _____