

Newberry Condominium Association
Application for Swimming Pool Passes
For TENANTS

To be completed by Unit Owner:

This is to authorize the Newberry Condominium Association to issue pool passes to the tenants of my unit listed below.

In signing this form, I acknowledge that I am assigning my pool privileges to my tenant and agree to inform them of their requirement to abide by the Rules and Regulations for the use of the pool.

OWNER/AGENT SIGNATURE: _____

NEWBERRY ADDRESS: _____

To be completed by Tenant:

Please note identification indicating residence for each individual at the above address will be required to obtain pool passes.

TENANT'S NAME: _____

EMERGENCY PHONE NUMBERS: HOME: _____ WORK: _____

CELL: _____ CELL: _____

Please note identification indicating residence for each individual at the above address will be required to obtain passes.

Name: _____ Relationship: _____
Date of Birth: _____ Height: ___ ft. ___ in. Eye Color: _____ Hair Color: _____

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