

Plantations Two Community Association, Inc.

2024 - OUTSIDE Pool Membership -- Information Sheet

Please **PRINT** or type. **FORM** must be completed & signed to process your membership.

TYPE OF MEMBERSHIP (check one):

Individual: Renewal New **Family:** Renewal New **Trial**

OUTSIDE POOL MEMBER CONTACT INFORMATION

Address: _____
 Phone(s): Home: _____ Cell(s): _____
 Email(s): _____

INDIVIDUAL MEMBERSHIP (Includes Only one Adult individual who must be at least 18 years or older):

First & Last Name: _____ Birth Date: _____

FAMILY MEMBERSHIP

ALL INDIVIDUALS MUST BE FULL-TIME RESIDENTS at the Member's listed address.

Proof-of-Residence is Required for OTHER ADULTS & can be requested for any member listed.*

ADULTS (First & Last name of only two adults -- owner, spouse, partner, etc.):	CHILDREN (First & Last name of all children under 22 years of age):	Date of Birth	Permission Age 12-14**
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
OTHER ADULTS (age 22 & over) (First & Last name & provide ID*):			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>

***Proof-of-residence (i.e., driver's license, utility bill, etc.) is required for all Other Adults & must be submitted with this form. Admittance to the pool will not be granted to the individuals until their proof-of-residence is provided.**

****All children under age 12 must be accompanied by an adult member. Children ages 12 through 14 may be admitted to the pool unaccompanied by an adult when (a) they pass a swim test administered by the pool manager or lifeguard, and (b) when a parent or guardian indicates permission by checking **YES** next to the minor child's name and signing the permission statement below.**

I hereby give my permission for the above-named children (ages 12-14); to be admitted to the pool unaccompanied by an adult after they have passed the required swim test administered by the Pool Manager or Lifeguard.

Parent/Guardian Signature: _____ Date: _____

CAREGIVER PASS

Cost = \$75.00 per Caregiver, per Season, with Restricted Access

(See restrictions & payment instructions on the OPM 2024 Pool Season Information Sheet.)

First & Last Name: _____ Birth Date: _____

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I have read and understand the Plantations Two Swimming Pool Rules & Operating Policy.

Member Signature: _____ Date: _____