Plantations Two Community Association, Inc.

2025 - 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:			
Email(s):			
Linai(3).			
INDIVIDUAL MEMBERSHIP (Includes Only of	one Adult individual who must be at least 1	8 years or olde	er):
First & Last Name:	Birth Date:		
FAMILY MEMBERSHIP ALL INDIVIDUALS MUST BE FU Proof-of-Residence* is Required for			
ADULTS (First & Last name of only two	CHILDREN (First & Last name of	Date of	Permission
adults owner, spouse, partner, etc.):	all children under 22 years of age):	Birth	Age 12-14**
			Yes No
			Yes No
OTHER ADULTS (age 22 & over)			Yes No
(First & Last name & <mark>provide ID</mark> *):			Yes INO I
			Yes No
			Yes No
			Yes No No
*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 by an adult after they have passed the requ			
Parent/Guardian Signature:		Date:	
	t = \$75.00 per Caregiver, per Season, was & payment instructions on the OPM 2024 P		
First & Last Name:	Birth Date:		
First & Last Name:	Birth Date:		
I have read and understand the Planta	tions Two Swimming Pool Rules & C	Operating Po	licy.
Member Signature:		_ Date:	