

Willowlake Homeowners Association, Inc.

2023 POOL REGISTRATION FORM

NAME: _____ Emergency Contact Person: _____

ADDRESS: _____ (Required) Emergency Contact Phone: _____

E-Mail: _____ (Required)

HOME PHONE NUMBER (Required): _____ OWN ____ or RENT ____

IF RENTER, OWNER'S NAME: _____

OWNER'S ADDRESS: _____

PLEASE LIST ALL NAMES OF FAMILY MEMBERS RESIDING FULL TIME AT PROPERTY:

NAME	AGE	(Req'd if less than 21)

Have you been issued an Access card? Yes, or no?

If you have a card, PLEASE LIST THAT CARD NUMBER IN THE SPACE BELOW OR YOUR CARD WILL NOT BE ACTIVATED. If you have lost your card, there is a \$10.00 replacement card fee that must be paid to receive a new card.

Card No. Issued: _____ Date Issued: _____

Card No. Issued: _____ Date Issued: _____

Card No. Issued: _____ Date Issued: _____

I, _____ by signature on this document, hereby agree to comply with the posted rules of the Willowlake Homeowners Association, Inc.

I have read the posted Rules and understand them. **I understand that failure to comply with the Pool Rules and/or to not obey the posted Pool Hours can result in the loss of my pool privileges.**

Signature

Please email or mail this form to: cmassistant@randallmanagement.com
Willowlake Homeowners Association, Inc. c/o Randall Management, Inc.
6200 Savoy Drive, Suite 420, Houston, Texas 77036

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