

2024 Pool Pass Registration Form

HIGH POINT HOMEOWNERS ASSOCIATION

HOMEOWNER LAST NAME ONLY (Please Print) _____

ADDRESS _____ [] Own [] Rent

Phone _____ Email _____

Emergency Contact _____ Phone Number (____) _____

LIST ALL FAMILY MEMBERS: (Resident and immediate family members living at above address.)

PRINT FIRST & LAST NAME	DATE OF BIRTH REQUIRED for everyone under 25 years of age - print "ADULT" for over 25
1.	Date of Birth: / /
2.	Date of Birth: / /
3.	Date of Birth: / /
4.	Date of Birth: / /
5.	Date of Birth: / /
6.	Date of Birth: / /

**NO PASSES
WITHOUT
DATE OF BIRTH**

*Verification of
information may
be required by
trustees prior to
issuance of
pool passes.*

I have read and understand the published pool rules and agree to abide by these rules as well as any posted at the pool by association trustees. Use of High Point Pool Pass constitutes full acceptance of these published and posted rules. I affirm information on this registration form is accurate and acknowledge that falsification will lead to revocation of passes by the trustees.

HOMEOWNER SIGNATURE _____ Date _____

(In addition to above) Homeowner Consent for **Family Guest Pass** - I hereby authorize our Guest Pass to be used by Teenage family members to bring up to two guests, **12 to 15 years of age**, per teen and to be responsible for this use. Teen pass **MUST** be presented w/Guest Pass. I **fully accept responsibility for any and all persons admitted using this pass.**

HOMEOWNER SIGNATURE _____ Date _____

Complete Pool Pass Registration and return it to: **High Point Dues, P.O. Box 361065, Strongsville, Ohio 44136**. Requests received after April 1 require a check for \$10.00 as an administrative fee (donated to the High Point Swim Team). Send completed registration form with annual dues payment to PO Box. Pool pass distribution dates and times will be announced in May 2024 newsletter.

POOL PASS REGISTRATION FORMS MUST BE COMPLETED NOW AND SENT WITH DUES PAYMENT

- ☐ I request exemption to the Pool Pass Registration deadline and fee, as I am a new resident that moved into High Point after January 1, 2024. Please send passes to my home address now.
- ☐ Check for \$10 late fee payable to the High Point Swim Team for passes ordered after May 1.

Passes distributed by _____ Date _____ ☐ check rcd Mail Podium

Copies can be printed from website. See Forms section.

Copies of form permitted. Please return full sheet.