

**BIRNAM WOOD – FAIRFAX POOL
MEMBERS RENTAL PROPERTY APPLICATION FORM**

The following information is required from each property (home) owner who requests pool access for the single family residing at the rental property prior to issuance of a pool pass and use of the pool. **A pool pass will not be issued until the information from the owner or owner's authorized agent has been verified and all assessments and fees have been paid. Any cursing or foul language on the pool property or at the pool window will prevent a person from obtaining a pool pass.**

REQUIRED INFORMATION FROM PROPERTY OWNER – PRINT EXCEPT WHERE SIGNATURE REQUIRED:

I _____ hereby state that the information listed below is accurate to the best of my knowledge and the name(s) listed are those of a single family residing at my rental property located at

_____ in the Birnam Wood – Fairfax Subdivision. I understand that these are single family residences, that there are not multiple families residing at this address, and that those listed below are permanent residents at the rental property.

Subject to Article II of the Declaration of Covenants, Conditions, and Restrictions for the Association, I hereby grant this single family my right to "access and enjoyment" of the association pool and associated facilities. I acknowledge that by granting this right the members of the family are required to abide by the regulations related to pool use in order to maintain their privilege.

I authorize the tenant to invite guests consistent with association limits: () Yes () No

Agreed by: _____ Phone no.: (_____) _____

Signature: _____ Date: _____

REQUIRED INFORMATION FROM TENANT – PRINT EXCEPT WHERE SIGNATURE REQUIRED:

RESIDENT NAME: _____ DATE: _____

STREET ADDRESS: _____

HOME PHONE NO.: (_____) _____ CELL PHONE NO.: (_____) _____

WORK PHONE NO.: (_____) _____

EMERGENCY CONTACT:

_____ (_____) _____ OR

_____ (_____) _____

The following family members reside at the above address and hereby ask to be extended full member privileges. List only those persons that reside at the above address:

1. _____ Age: _____ Sex: _____ 2. _____ Age: _____ Sex: _____

3. _____ Age: _____ Sex: _____ 4. _____ Age: _____ Sex: _____

5. _____ Age: _____ Sex: _____ 6. _____ Age: _____ Sex: _____

REQUESTED BY: _____

(PRINT LEGIBLY!) Tenant

SIGNATURE: _____

Tenant