

Cooper Farms Recreational Association - Clubhouse Card Access Form

Property Address _____ Phone # _____

Email Address: _____

Anyone over the age of 18 must show proof of residency of living within Cooper Farms

Limit is four guests per visit

Resident Name (must live in the home)	Children's Names and Age (must live in the home)
1	1
2	2
3	3
4	4

Babysitter Information

The following persons are authorized to take my children to the pool in my absence. **I understand that they will need to use my access card and also have the approved Babysitter Tag with them** to be allowed access (provided by Cooper Farms after completion of this form). I, and my Babysitter, understand that my Babysitter is not allowed to use the facility by themselves, that they only have access while my children are in their care.

Name of Babysitter(s)	Address	Phone Number
1		
2		
3		

I am a Childcare Provider

The following children are in my care during the summer months; not a resident of my home. I agree to pay a fee of \$40.00 for the current season, in order to take them to the pool without paying an additional guest fee. I understand this information needs to be updated seasonally, and the fee will be paid each season. (not to exceed 4 children)

Name of Child and Age	Child's Parent(s) Name	Child's Parent Phone #
1		
2		
3		
4		

Manager Approval - Initials _____ Fee \$40.00 - Paid _____

By signing and submitting this form, I understand and agree to the following:

I am a Cooper Farms Owner / Resident. I am current with my mandatory Cooper Farms Community and Recreational Association dues. I understand and agree that the Club at Cooper Farms, their staff and Owners are not responsible for any injuries to me or someone with me while using the fitness equipment or the pool. I understand that non-residents can accompany me as a guest (not to exceed 4 guests per visit) to the pool by paying the guest fee at time of use. I understand that you must be 16 or older to use the facility without an adult. I understand that I am the card holder and the only authorized user of my card, other than the designated babysitter as outlined above.

I understand that my first card is free. If I lose or damage my card, I will pay the replacement fee to obtain another one.

I understand and agree to conform and be bound by the Rules and Regulations of the Club and Deed Restrictions for Cooper Farms subdivision. Failure to comply may result in the termination of access to use of the facilities.

Signature _____ Date _____

For Office Use Only: Previous Owner Deleted ___ Current ___ Picture Requested ___ Net2 ___ Card Print Request ___