



**WITCHDUCK LAKE CONDOMINIUM ASSOCIATION
POOL RULES ACKNOWLEDGEMENT FORM - 2017 SEASON
(Pool opens 10:00 a.m. on Saturday May 27, 2017)**

IF YOU HAVE YOUR KEY FROM LAST YEAR: No new key is needed. Complete this form email, fax, or mail it to The Select Group.

FOR NEW RESIDENTS: If you are new to the community since September 2015 and would like a pool key, bring this completed form in to the offices of The Select Group at the address at the bottom of this form.

FOR LOST/REPLACEMENT KEYS: If you have lost your key and need a replacement, bring the completed form and your check or money order in the amount of \$5.00 per key payable to Witchduck Lake in to the offices of The Select Group at the address at the bottom of this form.

I, _____ understand that all persons using the pool do so at their own risk. Witchduck Lake Condominium Association, Inc. assumes no responsibility for any accident, injury, or any loss or damage to personal property.

I agree to act as a "Responsible Person" at the Witchduck Lake Condominium Association pool. Use of the pool is restricted to the hours established by the Board of Directors for pool operations. I agree to return the pool key to the Association when requested and to abide by the rules stated and acknowledge that I have received a copy of said rules.

As "Responsible Person," I agree that:

- a. I acknowledge that I am at least 18 years of age.
- b. I acknowledge that there are no lifeguards on duty at the pool and that I and the residents/guests of my unit will be swimming at our own risk.
- c. I acknowledge that there must be at least two people at the pool at all times of operation in order to swim.
- d. I acknowledge that the pool usage is restricted to the hours of 10AM to 8PM.
- e. I acknowledge that persons under the age of 16 years of age will be accompanied by a "Responsible Person" when they are within the confines of the pool fence.
- f. I acknowledge that I, my guests/tenant have read and will comply with the rules and regulations.
- g. I acknowledge that owners/tenants must accompany their guests at all times while guest is at the pool.
- h. I acknowledge that I shall not make any claim against the Association or Management for or on account of any injury or loss of life or damage to or loss of personal property.
- i. I will report any violations of the rules to the Association Manager.

Individuals residing at (unit address): _____

Include: Name: _____ Age _____
 Name: _____ Age _____
 Name: _____ Age _____
 Name: _____ Age _____

I am the: ___ Owner ___ Renter **If Renter, Owner's name is _____

Phone Numbers (for emergencies): (h) _____ (w) _____ (c) _____

Signed: _____ Date: _____