

**APPLICATION FOR SIERRA SPRINGS RECREATION CARD**

4240 Sierra Springs Drive, Pollock Pines, Ca 95726

530 – 644-2182

I \_\_\_\_\_ a member in good standing, agree to be responsible for myself, family, tenants, or anyone else using my card. I acknowledge receipt of recreational facilities rules and will ensure anyone using my card is aware of them. I understand that I will be responsible for payment for correction of all damage caused by my family or tenants or guests. I am responsible for immediately informing the office of new tenants and lost or stolen card. I understand my card may be shut off for violation of recreational facilities rules, CCR violations, or failure to pay dues or assessments.

Date \_\_\_\_\_ phone # \_\_\_\_\_ Owners Name \_\_\_\_\_

Unit/Lot # \_\_\_\_\_ e-mail \_\_\_\_\_ Mail Address \_\_\_\_\_

Below list the names of children or relatives living in your house who are authorized to use your the pool and lodge card. You may use the back of this form if more room is needed.

Names of family members	Date of Birth
_____	_____
_____	_____
_____	_____
_____	_____

I agree to abide by the rules and regulations governing the recreation facilities. **Only** the property owner is allowed six guests at the facilities. **Cards: Only one card issued per lot. Do not duplicate. Replacement charge for lost card is \$25.00. See “Recreational Facilities Rules & California Laws”**

I understand that I may elect to transfer my recreation access card to a tenant, but that I may **NOT** transfer membership. The right to use the recreation facilities may be suspended by the Board of Directors for violation of any rule, or for failure to pay dues or assessments owed to the Association. (Re: Bylaws Sec.206E)

**I have read and understand the above** \_\_\_\_\_ **Date** \_\_\_\_\_

Card# \_\_\_\_\_ Lost Card fee \$25.00 \_\_\_\_\_

RETURNED KEY # \_\_\_\_\_ NO KEY RETURNED \_\_\_\_\_

**TENANT OCCUPIED PROPERTY**

I have elected to loan my card to the following tenant currently occupying my property:

Tenants Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ e-mail \_\_\_\_\_

Names and ages of family members living with tenant \_\_\_\_\_ Date of birth \_\_\_\_\_

\_\_\_\_\_

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