

Sierra Springs Owners Association
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SIERRA SPRINGS OWNERS ASSOCIATION RECREATION STAY FORM

Number in Party: _____
SSOA Unit & Lot #: _____
Site #: _____

Welcome to the SSOA Recreation Stay Area

Please complete both the top and bottom sections of this form. Once completed, return the form to the SSOA Office for approval.

OWNER: _____ DATE: _____

ADDRESS: _____ ARRIVAL DATE: _____

PHONE #: _____ DEPARTURE DATE: _____

GUEST NAME: _____

AUTO LICENCE # _____ TRAILER/RV LICENSE # _____

I am a Member in good standing of the Sierra Springs Owners Association, and I and/or my guest will abide by the rules and regulations for utilization of the area.

Signature: _____ Date: _____

(Tear off bottom portion and post at site)

RULES:

- 1) Only SSOA Members and their guest may use the Recreational Area. Members are responsible for the conduct of their guest.
- 2) Use shall be on first come, first serve basis. Members shall register with the SSOA Office upon arrival. Registration shall be for a maximum of 14 days. Members may receive ONE extension for an additional 14 day period providing:
 - a) Approval is granted by the Association Manager
 - b.) Sufficient space is available
 - c) ALL rules regarding use of SSOA facilities are observed.
- 3) No site shall be left unattended for more than 72 hours. If this occurs the issued permit will automatically be voided and the vehicle shall be towed away at the owners' expense.
- 4) Members may not register guests for extensions without prior approval received from the Association office.
- 5) No more than six (6) people and two motor vehicles per site unless prior approval is received. Members may register for only one site a) at no time will a member be permitted to move their Trailer or RV to another site without prior permission of the Association Manager.
- 6) Pets must be under control at ALL times.
- 7) Dispose of trash in can provided.
- 8) NO OPEN FIRES! (FIRE DANAGER)
- 9) No loud noise or music.

Name: _____ Site # _____ Arrival Date: _____

Departure Date: _____ Vehicle License # _____

Trailer or RV License # _____

Office Approval: _____ Date: _____