

APRIL VILLAGE HOA Pool Registration

Homeowner Acceptance of Liability

I, _____, owner of the home located at _____ in April Village, in Houston, Texas 77077, do hereby acknowledge that I accept and have paid for a magnetic access card, number _____ and a key for use by me and my dependents for access to the April Village Community Pool. I agree to be responsible for the use of the magnetic card and key to access the April Village Community Pool.

I understand that **no child under 16** may be at the pool without a parent/or adult at least 21 years old.

I release the April Village Homeowners Association, and Principal Management Group, Inc. of any and all responsibilities and liabilities for admitting me and my dependents, relatives, or other guests into the pool facility. **I am aware that all persons using the April Village Community Pool are swimming at their own risk and that NO LIFEGUARD WILL BE ON DUTY.**

****NOTE: The lock for the pool has been changed. There will be an additional \$5.00 fee to exchange your current pool key. A pool key and card are \$20.00. Please attached form filled out to Graham Management, 2825 Wilcrest Dr. Ste. 600, Houston TX 77042 and you will receive one access card and one key for the pool (only one per household). Please remember you must be current on your annual assessment. Replacement card and key are \$35.00. Check or money order only; made out to April Village.**

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE RULES SET FORTH FOR THE APRIL VILLAGE COMMUNITY POOL. IN ADDITION, I ACKNOWLEDGE THAT I AM RESPONSIBLE FOR THE ACTIONS OF MYSELF, MY DEPENDENTS (I.E. CHILDREN, RELATIVES, ETC.) AND GUESTS USING THE POOL AND RECREATIONAL FACILITIES. I UNDERSTAND THAT IF ANY OF THE INDIVIDUALS I AM RESPONSIBLE FOR ARE FOUND TO HAVE VIOLATED ANY OF THE RULES OR CAUSED ANY VANDALISM TO THE POOL OR RECREATIONAL FACILITIES, I WILL FORFEIT THE RIGHT TO USE THOSE FACILITIES DURING THE CURRENT YEAR AND I COULD BE SUBJECT TO LEGAL PROCEEDINGS OR REIMBURSING APRIL VILLAGE HOMEOWNERS ASSOCIATION FOR ANY DAMAGES.

Homeowner(s) Signature _____

Date _____

Phone Number _____

Emergency Contact:

Name

Phone

Relationship of the emergency contact _____