## **Huntwyck Village Pool Guest Application/Waiver**

# MUST FILL OUT FOR EACH PERSON ENTERING POOL COMPLEX PLEASE PRINT CLEARLY

Date:	File:	_	
Guest Name:			
DOB:	Lot #	_	
Address:			
	Email Address:		
Emergency	Emergency		
Contact:	Phone:		
Medical Conditions (Alle	rgies,ect.):	<del>-</del>	

## WAIVER/RELEASE OF LIABILITY

I acknowledge that lifeguards will not be present and that I am swimming at my own risk. I agree to defend, indemnify, and hold harmless the Huntwyck Village Homeowners Association, its officers, employees, and agents for any injury or death to myself. I have received a copy of the pool rules and agree to obey the orders of the lifeguards and pool supervisors

Guest Signature	•	
odest signature		 
Parent/Guardians Signature_		

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Guest Signature\_\_\_\_\_

Parent/Guardians Signature\_\_\_\_\_

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