

The Villages at Barrington Downs

MEMBERSHIP CARD APPLICATION AND AGREEMENT

Homeowner(s) Name: _____

• Homeowner(s) Address: _____ Village Name: _____

Family Members (residing at current address):

Last Name	First Name	Birth Date (If under 21 years of age)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Membership card(s) are to be used specifically for access to the Villages at Barrington Downs Amenities (Tennis Courts, Basketball Courts, Pool, and Clubhouse in accordance with rules). The card(s) carries responsibilities and restrictions.

New and replacement cards cost \$10.00 per card per member. The fee is non-refundable and payable by homeowner's check or money order. NO CASH IS ACCEPTED!

PLEASE READ CAREFULLY BEFORE SIGNING:

- **ALL Residents must have their membership card in their possession when using the facilities.**
 - The **facilities are equipped with 24 hour surveillance and security alarms.**
 - Cards will need to be swiped to enter facilities.
 - Notice of misuse of the facilities will be reported to the Clubhouse Manager.
 - **Misuse of membership cards will be subject to suspension and a \$50.00 reactivation fee.**
 - Lost or stolen cards must be reported to Clubhouse Manager **within 24 hours.**
 - **The card(s) cannot be used to have, or form parties or meetings.**
 - **Delinquency in assessment fees will result in the immediate deactivation of the card and its use until full payment is made.**
 - **All charges incurred for false alarms will be covered by homeowner** (St. Louis County, Alarm Company, and any other charges incurred by the Homeowner Association).
 - **The homeowner is responsible for all membership cards and subject to card deactivation with offenses.**
- If anyone is found to be in the possession of any membership card not registered to that individual card will be subject to suspension.** I have been given rules and violations for Tennis Courts, Basketball Courts, Swimming Pools, Fitness Area, Pool Table, and Table Tennis. _____ (Homeowner's Initial)

I hereby certify that the above is a true and accurate list of permanent residents of the above listed homeowner address.

I understand the use, restrictions and responsibilities of using the membership card(s). I will also review these rules and consequences with all card members in my household. I also understand that this card remains the property of the Homeowners Association of the Villages at Barrington Downs.

Homeowner's Signature: _____ Date: _____

Homeowner's Telephone Number: _____ Proof of Residency: _____

Clubhouse Office Manager's Signature: _____ Date: _____



3898 Grand National Drive
Florissant, Mo 63034
314-921-9135

Waiver of Liability

I, _____ hereby waive The Villages at Barrington Downs , its Trustees, Employees, and Agents from any liability of injury, loss or damage to personal property associated with activities participated in this facility.

I acknowledge that I understand the waiver described in this document. Waiver is made to the maximum extent permissible under applicable law. I acknowledge that I have signed this document under my own free will.

Printed Name _____

Signature _____

Date _____

Decline _____