**2023 Kendrick Farm Pool Admission Form**

 **Fob #** (first five digits only)**: \_\_\_\_\_\_\_\_\_\_\_\_\_ Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Mt. Holly, NC 28120

**Members who live IN the household of fob holder.**

(Fob holder is either the homeowner or authorized tenant for rental properties that choose to convey fobs.)

|  |  |  |
| --- | --- | --- |
| **Name** (First & Last) | **Birthdate** | **Current Age** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**By signing this agreement, I acknowledge that at NO time is there a LIFEGUARD ON DUTY and I voluntarily assume** the responsibility for the safety of myself, children, and guests. I understand that use of the pool facilities during my stay involves certain risks, including but not limited to: the risk of injury or death resulting from possible malfunction of the pool equipment, the risk of injuries resulting from tripping or falling over obstacles in the pool area, the risk of injuries resulting from other unsupervised swimmers, and the risk of other injuries resulting from participating in any action in the pool or surrounding areas including deck, foyer and bathrooms. I recognize and fully understand that the above list is not a complete or exhaustive list of all possible risks of the types of risks that I am assuming, and I recognize and fully understand that the pool staff on the premises are ATTENDANTS ONLY, NOT LIFEGUARDS.

 **I voluntarily agree to assume all risks and accept sole responsibility** for any injury to my child(ren), guests, or myself, including but not limited to, personal injury, disability, and death, illness, damage, loss, claim, liability, or expense, of any kind, that I, my guests, family, and my child(ren) may experience or incur in connection with attendance at the pool or participation in pool activities (“Claims”). On my behalf, and on behalf of my children and/or guests, I hereby release, covenant not to sue, discharge, and hold harmless the Kendrick Farm Homeowners Association and Aquatech Pool Management and their employees, agents, directors, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Kendrick Farm Homeowners Association, the Board of Directors, and Aquatech Pool Management, and their employees, agents, volunteers, and representatives, whether the Claims occurs before, during, or after participation in pool facility activities.

**By signing this form, I acknowledge that I have read and understand the 2023 Kendrick Farm HOA Pool Rules and agree to abide by them, including any other specific directions given by pool staff while on the premises, and I accept responsibility for everyone entering the pool via my fob swipe.**

**Home OWNER or Authorized Fob HOLDER only:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name Signature Date

**Submit this form** directly to pool staff during any open hours. Do not put into the dropbox and do not email it.