

# Rowell Estates Condominium Association

## Guest Registration Form

Condo Unit: \_\_\_\_\_ Date: \_\_\_\_\_

Condo Owners: \_\_\_\_\_

Emergency contact phone number: \_\_\_\_\_

Name of Guests: \_\_\_\_\_

\_\_\_\_\_

Children's names and ages: \_\_\_\_\_

Vehicles: Make \_\_\_\_\_ Year \_\_\_\_\_ License State and Number \_\_\_\_\_

Make \_\_\_\_\_ Year \_\_\_\_\_ License State and Number \_\_\_\_\_

Arrival Date: \_\_\_\_\_

Estimated Departure Date: \_\_\_\_\_

**This form must be completed by the unit owner for any guests staying more than 14 days and submitted to the Board of Directors prior to the arrival of your guests. Guest visits cannot exceed 90 days in a 12month period. Conduct of the guests is the sole responsibility of the unit owners.**

Condo owner signature: \_\_\_\_\_

Once completed, put this form in the RECA black drop box.

Thank you,  
Rowell Estates Board of Directors