

**IF NO CHANGES, PLEASE INITIAL**  
(and complete only name and address section)

# MILESTONE OWNERS ASSOCIATION

## 2018 FAMILY POOL ACCESS FORM

\*\*\*\*PLEASE COMPLETE FULLY AND PRINT CLEARLY\*\*\*\*

Family's **LAST** Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Street Address \_\_\_\_\_  
Homeowner #1 Name/Work Phone \_\_\_\_\_ Homeowner #2 Name/Work Phone \_\_\_\_\_  
Homeowner #1 Cell Phone \_\_\_\_\_ Homeowner #2 Cell Phone \_\_\_\_\_

Please list the names of **all** persons **WHO ACTUALLY LIVE IN YOUR HOUSEHOLD** that will be using the pool.

**IMPORTANT:** A member shall consist of the immediate family which is defined to include husband, wife, and/or dependent children in the same domicile; and other, upon Milestone Owners Association's (MOA) approval, who resides in the same domicile and are dependent on the head of the household, who are included on the membership application.

**Note:** An **adult** need to only provide his/her name **and** place a **check mark** in the adult column. If you have **children** who will attend the pool, please fill out their name(s) in birth order with **DOB and** their **age as of June 1**.

<u>First Name</u>	<u>Last Name</u>	<u>DOB for Children</u> <u>UNDER 18 Years</u>	<u>Age</u>	<u>Adult</u>
1 _____	_____	____ - ____ - ____	_____	_____
2 _____	_____	____ - ____ - ____	_____	_____
3 _____	_____	____ - ____ - ____	_____	_____
4 _____	_____	____ - ____ - ____	_____	_____
5 _____	_____	____ - ____ - ____	_____	_____
6 _____	_____	____ - ____ - ____	_____	_____
7 _____	_____	____ - ____ - ____	_____	_____

I, (please print clearly) \_\_\_\_\_, desire the privilege of using the **Milestone Association Pool**. I understand that any person listed on this application, including myself, will be bound by the Rules and Regulations set forth by Milestone for use of the pool and that everyone listed on this application are **permanent household residents**. I understand that this application serves as a formal agreement signed between the *Milestone Homeowners Association* and myself. **Guest pool passes will be distributed by the pool gate attendant and are mandatory for admittance of any guests to the pool.** If you have further questions, please contact the Milestone Site Manager at the clubhouse, 550-4656.

Full Name *printed* \_\_\_\_\_ & Signature \_\_\_\_\_  
Homeowner Homeowner

Email address \_\_\_\_\_ **\*\*Email addresses will be for community use only.**

**Pet Directory:** (Optional—this information will be used to update a directory that will help identify or reunite lost/found pets. You may also send a picture of the pet to manager@milestonecommunity.com)

Pet name: \_\_\_\_\_ Type of pet: \_\_\_\_\_ Pet description: \_\_\_\_\_

Pet name: \_\_\_\_\_ Type of pet: \_\_\_\_\_ Pet description: \_\_\_\_\_

**Submit this form to the clubhouse office by scanning and sending it to the clubhouse office email address (manager@milestonecommunity.com) or by mailing it to: Milestone Clubhouse, 11030 Milestone Drive, Mechanicsville, VA 23116. Due to construction, forms cannot be accepted on-site at this time.**