

## HAMMOCK TRAILS HOMEOWNERS ASSOCIATION, INC.

## POOL ACCESS KEY CARD AGREEMENT

email: gate@artemislifestyles.com

Resident/Tenant Name:	
Address:	
Email:	
Owner Renter	Note: Renter must attach a copy of rental agreement/contract.
Signature	Date

- I received the key card for the pool.
- ➤ I understand that the key card is the property of Hammock Trails HOA, Inc.
- I understand that I may not allow individuals outside my immediate family or underaged individuals within in my family or household (age 14 and under) to use the card.
- ➤ I received, read, and understand the pool rules and will adhere to them.
- ➤ I understand that if I break the pool rules more than once or multiple rules in a single visit, the privilege to use the pool will be suspended (card deactivated).
- ➤ I understand that when requested, I will present to any HOA Board of Director, HOA Officer, HOA Committee member, management company representative (CAM/LCAM), security officer or law enforcement authorities this key card for inspection along with proof of residency within the community when asked.
- > I understand that I will follow the directions of the Security Officer on duty and that failure to do so will be cause for my card to be deactivated.
- ➤ I understand that If I lose the key card, I will be assessed a non-refundable fee for a replacement:
  - First time replacement for lost card is \$75.
  - o More than once, replacement is \$150 each time.
- ➤ I understand that should I fall behind in my HOA dues/assessments, the privilege to use the pool will be suspended (card deactivated) until which time they are paid in full (Florida Statute 720.305(3)).
- ➤ I understand that if I am not currently up to date with the HOA dues/assessments at the time of receiving this card, it will not be activated (F.S. 720.305(3)).
- ➤ I understand that if I use my card to allow any other resident access to the facility when their card does not work, that my card will be deactivated for a period as deemed appropriate by the Association's Board of Directors per the Florida Statute.

Version 8 (06/2022)	Key Card #:
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A Deed Restricted Community

Incorporated 2006

c/o Artemis Lifestyles 1631 E Vine St, Suite 300 Kissimmee, FL 34744 PHONE 407-705-2190

## **Household List**

List ALL family household members (including name/s listed on the first page of this agreement) and ages that are residing at this address.

Age	Adult (15+)/ Child (less than 15)	OFFICE CONFIRM
	Age	Age Adult (15+)/Child (less than 15)

Important note: All individuals 18+ yrs. residing at the address must present a government issued ID when utilizing the pool facility.