



**HAMMOCK TRAILS
HOMEOWNERS ASSOCIATION, INC.
POOL ACCESS KEY CARD AGREEMENT**

email : gate@artemislifestyles.com

Resident/Tenant Name: _____

Address: _____

Email: _____

Owner Tenant

**Note: Tenant must attach a copy of residential lease agreement.
Card is deactivated at end of lease term.**

Signature _____ Date _____

- I received the key card for the pool.
- I understand that the key card is the PROPERTY of Hammock Trails HOA, Inc. and that the card must be returned to the HOA upon sale of the home or at the end of the residential lease agreement term. A "non-refundable" replacement (as listed below) fee will be assessed upon failure to return card.
- 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, guard 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 guard on duty and that failure to do so will be a cause for the 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 a \$75 "non-refundable" fee will be assessed.
 - For each subsequent replacement for lost card a \$150 "non-refundable" fee will be assessed 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 9 (04/2024)

Key Card #: _____

**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.

Full Name	Age	Office Use Only	
		Adult (15+)/ Child (less than 15)	OFFICE CONFIRM

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

Note: ALL individuals, age 18+ years, **MUST** present a government issued ID showing the address listed on this agreement to gain access to the facility. Individuals **NOT** residing at the residence are considered guests. ALL guests, age 18+ years, **MUST ALSO** present a government issued ID. All individuals under 15 years of age must be always accompanied by a resident 18+ years of age.

Guests must **ALWAYS** be accompanied by a resident 18+ years of age and are not permitted to be left alone at the pool.