

Grayhawk

Association of Homeowners, Inc.

12801 N. Central Expressway, Suite 1401

Dallas, Texas 75243

(972) 960-2800 Fax 1 (888) 980-0985

POOL CARD (or mobile phone access) REQUEST

Name:	
Address:	
Home Phone:	Work / Cell Phone:
Home Owner: <input type="checkbox"/>	Tenant: <input type="checkbox"/> I want mobile phone access, NOT a card: <input type="checkbox"/>
Email Address:	

NOTE: Pool card requests for use by tenants must be approved by the homeowner and only one card per address will be provided at no charge. Any additional pool cards are only available for a charge of \$75. Replacement pool cards are \$25 and the old card is deactivated.

OFFICE USE ONLY

Date Request Received:

Date Issued:

Complete this form and return it to:

Amenities Department - amenities@sbbmanagement.com

You may alternately fax the form to 1 (888) 980-0985

Note: Pool cards are sent via U.S. mail and requests are processed in the order received. Please allow time for delivery. You may pick up a card by contacting the amenities department for an appointment if you wish. **If you want mobile phone access** instead of a pool card, please contact the amenities department for an appointment, as this requires a coordination at the pool gate.

Acceptance of the pool access card or mobile phone access for the Grayhawk pools indicates your acknowledgement that the pools will not have Lifeguards or other attendants. You accept responsibility that any members of your household and other invited guests use the Pool and other Association common areas at your own risk. You acknowledge that the members of your household or other invited guests will abide by any posted or published rules, procedures or signs associated with the use of the Association's recreational and common facilities and that violations may result in a suspension of privileges. You acknowledge that you may be held financially responsible for acts of mischief or vandalism by members of this household or other invited guests that result in damage to the Association's equipment or facilities.

You acknowledge that you will not use the Association's facilities if you are unwell and that the Association, its respective directors, officers, agents, employees and contractors (collectively, the "Releasees") are not responsible for any injury or illness you believe occur from your use of the facilities. You warrant, covenant and agree that the release, waiver and assumption of the risk contained herein shall be binding on anyone who makes a claim against any of the Releasees on my behalf or resulting from injuries which I may incur or suffer. You further agree to INDEMNIFY AND HOLD THE RELEASEES HARMLESS from any claim asserted by or on behalf of my family members based on facts or circumstances encompassed by the Risks. THIS INDEMNITY shall include any defense costs incurred by Releasees.