

ASHFORD COMMUNITY ELECTRONIC RECREATIONAL ACCESS CARD APPLICATION FORM -2022 SEASON

In order to be eligible for an Ashford Recreational Card for you, your family, tenants, or guests, your assessment account must be current and you must not have any open Architectural violations. This 4-page application must be properly completed and returned **NOLATER THAN prior to Friday, April 29, 2022 to: Comsource Management Inc, 3414 Morningwood Drive, Olney, MD 20832. Attn: Shelly Young** in order to be processed for receipt in advance of the opening of the 2022 season. Applications received after the deadline, may not receive their Ashford Recreational Cards before the opening of the pool season.

1. RECIPIENT(S) OF ELECTRONIC ACCESS CARD:

Homeowner Tenant (Must have Home owner complete back of Application)

2. **Copy of the lease must be provided.

3. NAME, ASHFORD ADDRESS & TELEPHONE OF PRIMARY OWNER/TENANT (Please Print):

	Hm:	Wk:	
Last	First	MI	
Street Address			
City	State	Zip	

Please list your Access Card #: _____

3. ALL RESIDENTS who will be using the Ashford HOA Recreational facilities:

Please name all residents "living" at the address listed above, including the primary applicant listed above. You may request up to four (4) free Ashford Recreational Cards per household plus up to two (2) additional cards for a fee of \$20.00 each. **Please note, replacement cards will ONLY be issued for a fee of \$25.00 per card.**

***Please make sure that payment is included with your application. Punch card pool guest passes will automatically be included with each application. *A passport photograph of each person listed below MUST be included with each application. Please write the names on the back of each photo. Application with no photos or no name on the back will not be processed.**

Full Name	Birth Date (17 & under)
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. Requires \$20.00 Fee - _____	
6. Requires \$20.00 Fee - _____	

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I, the undersigned, do hereby agree to abide by the Rules and the Regulations of the Ashford Homeowners Association as they apply to any use of the recreational facilities by myself, my family, and/or my guests. Failure to comply with the rules and regulations will result in either temporary suspension or complete loss of pool and recreational privileges for the remaining balance of the recreation season. I also understand and agree that I/(we) will be held accountable for the actions of the individuals whose names are truthfully stated above.

Signature – owner/tenant	Date
Signature - owner/tenant	Date

4. HOMEOWNER AUTHORIZATION FOR TENANTS

Note: This form must be signed by property owner or agent for Ashford Recreational Cards to be issued. This form must be signed annually, regardless of prior authorization. We will not process any application if there is no lease on file with management. All Ashford Recreational cards will be mailed directly to the owner of record for distribution to tenants.

I, _____, as owner (or agent thereof) of the property located at _____ in the Ashford HOA Community do hereby transfer my recreational privileges to my tenants whose names appear on the front of this application.

Signature - owner	Date
Signature – co-owner	Date

Homeowner (s) offsite Address: _____
 Email: _____ Cell #: _____
 Home #: _____

5. EMERGENCY INFORMATION

Please complete the following information in the event an emergency occurs at the pool to you or another member of your household.

Emergency Contact _____ Phone _____
 Alternate Emergency Contact _____ Phone _____
 Non-household member emergency contact _____
 Phone (H) _____ (W) _____

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**ADDENDUM 1
SWIMMING POOL RULES**

No person under the age of 18 (Carrying RED card) will be permitted in the swimming pool area without being accompanied by their parent or guardian (age 18 years or older).

Parents or adult guardians (age 18 years or older) (Carrying GREEN card) are fully responsible for all persons under the age 18 using the swimming pool facilities.

Parents are required to accompany their children in the wading pool area at all times.

All children in diapers must wear plastic pants with snug fitting elastic waist and leg fittings before entering the swimming pool. Parents must report any "accidents" to lifeguard immediately.

All persons must shower before entering the swimming pool or wading pool.

All conduct that endangers the safety and comfort of others (i.e. running on deck, diving from the shallow end) will be prohibited within the pool area.

No person showing evidence of a communicable disease, bodily discharges, open blisters or cuts and bandages will be allowed entry to the swimming pool area. Persons suspected of being under the influence of drugs or alcohol shall be prohibited from entering the water.

No person experiencing diarrhea or other gastrointestinal (stomach) symptoms will be allowed entry to the swimming pool area.

No animal will be allowed in the pool area or dressing rooms.

No glass containers are allowed in swimming pool area.

No swimming will be allowed during inclement weather conditions.

Waiver- as pool patron and/or the parent or legal guardian of pool patrons, I agree to the above pool rules and further agree to hold Owner/ Agent and its subsidiaries and their officers free and harmless from any claim or expense that may arise due to my use of the pool or use of the pool by my dependents, guest or other residing with me.

Pool Patron

Agent Ashford Homeowners Association

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PLEASE REMEMBER:

- Photos and payments (for 2 or more additional cards) must be attached. Write names on the back of photos.
- Attach copy of the signed lease if applicable.
- Incomplete applications will NOT BE PROCESSED.

FOR OFFICE USE ONLY:

1. Account Status:

Delinquent _____(no) _____(yes) Balance due \$ _____

2. ASC Inspection:

Date inspection performed _____ Violations? _____(yes) _____(no)

If yes please describe _____

APPROVED _____ **DENIED** _____ **REASON** _____

Cards issued: _____

Date Issued: _____