

## Ashburn Farm Association 21400 Windmill Drive Ashburn, VA 20147 703-729-6680 - pools@afhoa.net

## Resident Pool Pass Application

Applying for pool passes as \_\_\_\_ Owner \_\_\_ Renter

Adult Name 1:	lt Name 1: Email:					
dult Name 2: Email:						
Address:						
Home Phone: Cell Nu				Cell Number 2:		
Additional Members – Age two years	rs Date of Bir		Sex	Cell Phone (if applicable)		
and older				, 11		
				_		
	Eme	rgen	cy Conta	ct		
Name:	Relation	ı:		Phone Number:		
Resident Guidelines				Tenant Guidelines		
<ul> <li>New residents must present proof of residency and a valid ID due at issuing process. We accept any major bill (s) or closing documents.</li> <li>Pictures in JPG format for persons nine years and older, in passport style be taken/submitted with application.</li> <li>Passes must be updated for adults every five years and children every three years.</li> </ul>		<ul> <li>The Offsite Information Contact Form must be submitted before or during the request for pool passes.</li> <li>Proof of residency and a valid ID is due at issuing process. We accept any major bill. Lease is not accepted, due to easy fraudulence.</li> <li>Pictures in JPG format for persons nine years and older, in passport style be taken/submitted with application.</li> <li>Pool passes run with the lease term; when the lease expires, the pool passes expire. Offsite Information Contact Form and pool passes must be updated when lease is extended.</li> </ul>				
	Term	s and	l Conditio	ons		
Signing indicates member has read and u all accounts must be kept up-to-date, and	nderstood al privileges n	l Poo nay n	l Rules an ot have be	Rules as set forth by the Board of Trustees. and Policies and agrees to their terms. Please note, een suspended by the Hearing Committee for ers. Failure to do so will result in pass suspension.		
Member Signature:				Date:		
By signing, you're acknowledging your email add is used to inform residents of subjects such as trans AFA will not share your information.				I to our community communication email list. This system ents, and emergency situations.		
□ Please check here if	•		opt out of r	receiving these important emails.		

Fees Due: \_\_\_\_\_ Check: \_\_\_\_ Cash: \_\_\_\_ Completed By: \_\_\_\_ Date: \_\_\_