BentWater

**Tidal Wave Key Card Request Form (Pool Access Cards) 2017-18**

Please write a separate check for *EACH* pool key obtained, and make each check payable to ***“Bentwater HOA”*** dated July 1, 2018.

|  |  |
| --- | --- |
| Parent Name(s): |  |
| Phone Number: |  |
| Email Address: |  |
| Swimmer’s Name: |  |

*I have been issued a pool access card for the Bentwater, Cedarcrest Amenity Area. I have paid a $25 refundable deposit for this card. I understand that the card is to be used for regulated Tidal Wave Swim Practice ONLY. I will return my access card to the management of Tidal Wave Swim at the end of the swim season. Once the Bentwater Property Management Office receives the access card that I was issued, my deposit check will be shredded. All lost or stolen cards must be reported immediately to the Bentwater Property Management Office. Should this card be lost or misused by the person unlawfully obtaining it, I understand that I assume all liability for their actions. If the card is lost, stolen or not returned, Bentwater HOA reserves the right to retain my deposit.*

**I understand that if any of my issued cards are not returned to the management of Tidal Wave Swim by July 1st, 2018, it will result in the processing of my check deposit.**

|  |  |
| --- | --- |
| Signature: |  |
| Printed Name: |  |
| Date: |  |

***To be completed by TWS/HOA:***

Pool Access Card Number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check Number(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_