Washingtonian Woods Homeowners Association, Inc. Swimming Pool Application – 2022 Pool Season

Owner(s):					_
Address:					-
Cell Number:	Emergency N	lo.:			
Email Address of Homeown	er:				
Please check one of the foll	lowing:				
The Applicant is the	owner of record and curre	ntly occu	pies the reside	nce.	
The Applicant is ow Please complete Re	rner on record of record but nter's Information*	t does not	live in the cor	nmunity.	
*Renter's Name(s): <u>Note</u> : Renters must include address within Washington	e a copy of either their lea	ase or the	eir driver's lic	ense shov	 wing an
In the space below, please facility. Minimum Age Re accompanied by a parent, Cl parent.	quirement. All children u	nder the a	ge of 13yrs. m	ust be	
Household Members	Age Category			Age 13-17 Permission	
1	Over 17 Ur	nder 13	13-17	Yes	No
2	Over 17 Ur	nder 13	13-17	Yes	No
3	Over 17 Ur	nder 13	13-17	Yes	No
4	Over 17 Ur	nder 13	13-17	Yes	No
5	Over 17 Ur	nder 13	13-17	Yes	No
6	Over 17 Ur	nder 13	13-17	Yes	No
All members of your housel Please read the 2022 Swim members of your househol Your signature confirms to of your household underst	<i>ming Pool Operating Poli</i> ld. Please complete, sign, a hat you have read and un	cies, Rule nd return derstand	es and Regular the <mark>Swimmin</mark>	tions with g Pool A	pplication
Applicant's Signature:			Date:		_
Printed Name					

RETURN APPLICATION BY FRIDAY, MAY 13, 2022:

c/o Property Management People, Inc. 955A Russell Avenue Gaithersburg, MD 20879 Fax 240-361-0649

E-mail: washingtonianwoods@pmpbiz.com