

Fountain Hills Community Association, Inc.
c/o IKO Community Management
3416 Olandwood Court, Suite 210, Olney, MD 20832
2022 Swimming Pool Pass Application

Owner(s) _____

Address _____

Please check one of the following:

_____ The Applicant is the owner of record and currently occupies the residence.

_____ The Applicant is not the owner of record. Please complete Renter's Information*

*Renter's Name(s): _____

*** Note: Renters must include a copy of either the first page & signature page of their lease or their driver's license showing residence at the address listed on this application**

Telephone Numbers and Email Address:

Cell Phone _____ Work Phone _____

Home Phone _____ Emergency Phone _____

Email Address: _____

Please list **first and last name** for each member **who lives at the address shown above**, and who will use the pool facility:

AGE:

First & Last Name: _____

First & Last Name: _____

First & Last Name: _____

First & Last Name: _____

First & Last Name: _____

First & Last Name: _____

First & Last Name: _____

First & Last Name: _____

Applicant's Signature: _____ **Date:** _____

Printed Name _____

Please return completed pool pass application to: "ATTN: Marcy Grove" by: (1) postal mail to: IKO, 3416 Olandwood Court, Suite 210, Olney, MD 20832, (2) fax to: 301-924-9389, or (3) email to: MGrove@IKOCM.com, as soon as possible, but **no later than May 1, 2022**.

***Incomplete applications will be returned, and applications will not be accepted at the pool.**