



Gate Access Card Request

Owner's Name: _____
(Last) (First)

Tenants Name: _____
*If applicable (Last) (First)

Property Address: _____

Mailing Address: _____
(If different from Property Address)

E-mail Address: _____

Phone Numbers: Home: _____ Cell: _____

Four digit access code: _____ # of Vehicles: _____

Please list members of the household: (Name & Age – over 18 yrs = Adult)

List two Emergency Contacts (Name, Number & Relationship)

- 1) _____
- 2) _____

One card is issued per household: Replacement Rec Cards due to loss, damage, or additional cards requested are \$25.00 each

Two remotes are issued per household. Replacement remotes for Sec. 5 due to loss, damage or additional remotes are \$35.00 each.

By signing this form, I certify that I am the property owner and am responsible from ensuring that all of the members of my household are aware of the pool rules and will follow the posted pool rules and instructions when using the facility.

I am also aware that if any member(s) of my household is caught vandalizing the facility, conducting themselves in an inappropriate manner, the individual(s) may be prohibited from using the facility for a period of time or for the remainder of the pool season.

I understand and agree that the WoodCreek Reserve Community Association is not responsible for any injuries that might result from not following the posted pool rules and/or instructions.

(Signature)

(Date)

**Please return completed form to: Crest Management Company, AAMC, P.O. Box 219320, Houston, TX 77218-9320
Phone: (281) 579-0761 Fax: (281) 579-7062 Email: kristie.miller@crest-management.com**