



**HOMEOWNERS ASSOCIATION
POOL
ADMISSION FORM
FOR MINORS
(AGE 14-17)**

Name of Child _____

Age of child _____ Date of Birth _____

Name of Responsible Parent _____

Address _____ Phone _____

Emergency Contact _____

I understand that by allowing my child to swim at the Madeira Master Owner's Association pool at the Resident's Club that I assume all responsibility of this child.

The Management Company and the developer will not assume the liability of the above-mentioned Child's safety. You agree to instruct your child as to the pool rules and regulations and take full responsibility for their actions. You also understand that no one under the age of 18 may bring a guest to the pool.

Signature of Legal Parent or Guardian (to be signed in front of Witness)

Date _____

Signed this _____ day of _____, 20____

Witness Signature _____
