

**HARVEST BEND, THE MEADOW HOA**  
**POOL TAG REGISTRATION FORM**

2021

(This form will be maintained at our pool for emergency contact information)

HOMEOWNER LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ SPOUSE NAME: \_\_\_\_\_

HOME PHONE NO. \_\_\_\_\_ DAYTIME/CELL PHONE \_\_\_\_\_

OWN HOME: \_\_\_\_\_ RENTAL PROPERTY \_\_\_\_\_

**IF RENTAL PROPERTY, HOMEOWNER TO PROVIDE FULL NAME(S) OF TENANT AND SPOUSE. TENANT EMERGENCY PHONE NUMBERS, AND NAME, DATE OF BIRTH, AND AGE FOR TENANT'S CHILDREN.**

NAME OF TENANT(S) \_\_\_\_\_

TENANT HOME PHONE NO: \_\_\_\_\_ TENANT DAYTIME PHONE \_\_\_\_\_

.....  
**EACH HOMEOWNER OR TENANT MUST COMPLETE THIS SECTION:**

NAMES (of HBTM Homeowner(s) children, and/or tenants, for whom pool tags are being requested):

1 \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

2 \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

3 \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

4 \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

5 \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

6 \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

7 \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

8 \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

IN CASE OF AN EMERGENCY, PLEASE CONTACT \_\_\_\_\_

EMERGENCY PHONE 1: \_\_\_\_\_ EMERGENCY PHONE 2: \_\_\_\_\_

HOMEOWNER SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

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\_\_\_\_\_ Account cleared by ACMP

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Number of Pool Tags Assigned to this Account:

Adult Tags : \_\_\_\_\_

Minor Tags (Dark Green): \_\_\_\_\_