

Spectrum Association Management, LP
 9442 Capital of Texas Highway North
 Suite 500
 Austin, TX 78759
 (512) 834-3900 **Phone**
 (512) 834-3901 **Fax**

(OFFICE USE ONLY)		FORM 106- 310
Account: _____	Initials: _____	
Card Card#: _____	Date: _____	
M/O _____ PU _____	HO _____ TN _____	EXP: _____
Check # _____	Check Amount _____	

POOL RELEASE AND INDEMNIFICATION

I/We, the **homeowner(s) / tenants** (circle one) of the Round Rock Ranch Phase One Homeowners Association, Inc., request the Association issue a secured entry card for use by our family and guests, pursuant to the following terms and conditions and the published Association pool rules:

I/WE, HEREAFTER REFERRED TO AS "HOLDER", ACCEPT FULL RESPONSIBILITY FOR THE SECURED ENTRY CARD. BY ACCEPTANCE OF THIS CARD, I/WE RELEASE, INDEMNIFY AND HOLD HARMLESS THE HOMEOWNERS ASSOCIATION, AND EACH OF SAID ENTITIES: MEMBERS, OFFICERS, DIRECTORS, EMPLOYEES, AGENTS, ATTORNEYS, MANAGING AGENT, MANAGEMENT COMPANY AND AFFILIATES OF THE HOMEOWNERS ASSOCIATION, INC. FROM ANY AND ALL LIABILITIES, LOSSES, COSTS, EXPENSES (INCLUDING ATTORNEY'S FEES, COURT COSTS, AND/OR EXPENSES OF LITIGATION), CLAIMS, DAMAGES, CAUSES OF ACTION AND SUITS OF WHATSOEVER KIND OR NATURE WITHOUT LIMIT AND WITHOUT REGARD TO THE CAUSE OR CAUSES THEREOF, OR THE NEGLIGENCE OF ANY PARTY OR PARTIES, INCLUDING THE NEGLIGENCE OF THE HOLDER, THE ASSOCIATION OR ANY OF THE ENTITIES DESCRIBED ABOVE, WHETHER SUCH NEGLIGENCE BE SOLE, JOINT OR CONCURRENT, FOR DAMAGE TO ANY PROPERTY, OR ANY OTHER CAUSES OF ACTION, INCLUDING BUT NOT LIMITED TO CLAIMS CONNECTED WITH OR ASSOCIATED WITH FALLING, SLIPPING, DIVING OR DROWNING ARISING OUT OF OR IN CONNECTION WITH ME AND MY FAMILY OR ANY OF MY FAMILY'S GUESTS USING THE POOL. IT IS THE EXPRESSED INTENTION OF THE PARTIES HERETO, BOTH THE HOLDER AND THE ASSOCIATION AND ANY OF ITS ENTITIES, THAT THE INDEMNITY PROVIDED IN THIS PARAGRAPH IS INDEMNITY BY THE HOLDER TO INDEMNIFY AND PROTECT THE ASSOCIATION AND ITS ENTITIES FROM THE CONSEQUENCES OF THE HOMEOWNER'S OWN NEGLIGENCE, AND THE ASSOCIATION AND ITS ENTITIES NEGLIGENCE WHETHER THAT NEGLIGENCE IS THE SOLE CAUSE, OR A JOINT OR CONCURRING CAUSE OF THE INJURY OR DAMAGES.

INITIAL BELOW:

- _____ I/We acknowledge this is a swim-at-your-own-risk facility, with or without a Lifeguard on Duty, and an adult (over the age of 18) must accompany all children. Please see association's pool rules for additional information.
- _____ I/We acknowledge I/we have received read and fully understand the pool rules and agree to accept and abide by them. Failure to abide by the pool rules and guidelines may result in suspension of pool privileges.
- _____ I/We accept all responsibility for any family member(s) or guest(s) and their actions while using the pool.
- _____ I/We acknowledge pool availability is made possible by Association dues and access **may not be granted** if Association fees are not in good standing.
- _____ I/We acknowledge receipt of _____ (#) pool card(s). In the event of a lost pool key, the undersigned will be responsible for paying a lost card charge and will not be granted access to the pool facilities until such time the lost card fee has been paid. Cards are not guaranteed against damage or defect after 30 days from the date of purchase.

DATE	PRINTED NAME	SIGNATURE
PROPERTY ADDRESS		PHONE NUMBER
Mailing Address (If different than above)		

CARD TYPE	QUANTITY	SUBTOTAL
First Card FREE*		
Additional Card \$20.00		
Replacement Card \$20.00		
Please pay to the order of Round Rock Ranch		TOTAL

*New Homeowner eligible for one free card courtesy of RRR HOA (Card Fee Applies for Renters) _____
 (Initial)

Leased property requirements:

I/We the tenant(s) of the said property have provided Spectrum Association Management, LP with an authorization letter from the homeowner/property manager and the first & last page of lease agreement. _____
 (Initial)