

**MAXWELL CREEK  
POOL USE ADULT SWIM WAIVER**

Date: \_\_\_\_\_

Card #: \_\_\_\_\_

Homeowner Name: \_\_\_\_\_

Homeowner Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

I/We accept responsibility that any member of our household that uses the pool during the Adult Swim Times uses the **Pool facilities at our own risk.**

I/We also hereby acknowledge that members of our household or other invited guests will abide by any posted and or published rules, procedures, or signs associated with the use of the Association's recreational facilities and that violations may result in suspension of privileges. I/We acknowledge that we may be held financially responsible for acts of malicious mischief or vandalism by members of our household or other invited guests that result in damage to the Association's equipment or facilities.

I/We also agree that no member of our household under the age of 18 will swim during the designated adult swim hours.

\_\_\_\_\_  
Homeowner Signature

\_\_\_\_\_  
Homeowner Signature

- Please check if applicable. Homeowner gives authorization to Tenant of above listed property to also sign for use during adult swim hours. Identification will be required upon delivery to verify identity and legal age of recipient. Tenant agrees to abide by all existing Pool/Community rules, Regulations and Pool Usage Waiver. Any violation may result in suspension of privileges.

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Tenant Signature

**PLEASE FAX THE COMPLETED FORM TO LONE STAR ASSOCIATION MANAGEMENT AT 469-384-4643. ONCE THE FORM IS RECEIVED YOUR ACCESS CARD WILL BE REPROGRAMED TO OPERATE FROM 6:00 A.M. TUESDAY THROUGH SUNDAY. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT**

**LONE STAR ASSOCIATION MANAGEMENT  
2500 LEGACY DRIVE SUITE 220  
FRISCO, TEXAS 75034  
POOL ADMINISTRATOR  
469-384-2088  
469-384-4653 FAX**

**THANK YOU!**