

REMINGTON COMMUNITY DEVELOPMENT DISTRICT
Recreation Center/Gate Entry Registration

NAME OF OWNER(S):

ALL OTHER FAMILY MEMBERS USING THE FACILITIES:

ADDRESS _____

TELEPHONE _____

EMAIL _____

GATE ENTRY:

Barcode(s) Desired (maximum of four): _____

Please note: Any additional or replacement barcodes, regardless of the reason for replacing, are \$10 each.

If replacement needed:

Barcode(s) to Remain Active: _____

Barcode(s) to Deactivate: _____

RECREATION CENTER ENTRY:

Clubhouse Access Card(s) Desired (maximum of two) at \$10 each: _____

GATE ENTRY: The barcodes for gate entry are limited to four (4) per household. The first two will be provided by our office at no cost. Any additional or replacement barcodes, regardless of the reason for replacing, are \$10 each.

RECREATION CENTER ENTRY: Clubhouse cards are limited to two (2) per household. Access cards are \$10 each.

Please mail this form, proof of residency in the form of your Warranty Deed, and a check or money order, made payable to **Remington CDD**, to **219 East Livingston Street, Orlando, Florida 32801**. Payments must be in the form of a check or money order to be accepted.

THESE BARCODES AND ACCESS CARDS MAY **NOT** BE PICKED UP AT THE OFFICE.

ACCEPTANCE:

I acknowledge the waiver as set forth on the attached page and agree to its terms. I have also read and agree to abide by the recreation center guidelines and pool guidelines.

Signature of Owner / Authorized Representative

Date

**REMINGTON COMMUNITY DEVELOPMENT DISTRICT
WAIVER AND GUIDELINES**

RECREATION CENTER GUIDELINES:

- Fitness center equipment is reserved for adult use (over 18 years old)
- Recreation center hours:
Monday – Sunday, 6:00 a.m. to 10:00 p.m.

POOL GUIDELINES:

- Pool hours:
Monday – Sunday, dawn to dusk
- For a complete list of pool rules, please refer to “Our Neighborhood’s Policies and Rules.”

WAIVER:

I understand that the Remington Community Development District assumes no responsibility for injuries or illness that I may sustain as a result of my physical condition or resulting from my participation in any activities, sports, use of exercise equipment, or other activities. I expressly acknowledge on behalf of myself and my heirs that I assume the risk for any and all injuries and illness that may result from my participation in these activities. I hereby release and discharge the Remington Community Development District, its agents, servants, and employees from any claims for injury, illness, death, loss or damage that I may suffer as a result of my participation in these activities. I understand that Remington Community Development District is not responsible for personal property lost or stolen while participating at the Remington Recreation Center, pool and sport facilities.

Signature of Owner / Authorized Representative

Date

To be completed by District Office personnel:

Assigned Barcode Number(s): _____

Assigned Clubhouse Card Number(s): _____