REMINGTON COMMUNITY DEVELOPMENT DISTRICT

Recreation Center/Gate Entry Registration

NAME OF OWNER(S) / AUTHORIZED REPRESENTATIVE:

_____

NAMES OF RENTERS USING THE FACILITIES:

_____

_____

_____

ADDRESS _____

TELEPHONE _____

EMAIL _____

GATE ENTRY:

Barcode(s) Desired (maximum of two) at $10 each: _____

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 two (2) per household. 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 rental agreement, 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

_____ _____

Signature of Adult Participant (Renter) 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

_____ _____

Signature of Adult Participant (Renter) Date

To be completed by District Office personnel:

Assigned Barcode Number(s): _____ _____

Assigned Clubhouse Card Number(s): _____ _____