

SCOFIELD PHASE VIII RIDGE AT SCOFIELD FARMS

**Nicole Fousek
Beck and Company
8403 Shoal Creek Blvd
Austin TX 78757**

**APPLICATION TO USE POOL/RECREATIONAL FACILITIES AND RELEASE OF
LIABILITY**

Print Name _____ email _____
Head of household ScofieldRidge Homeowner

Spouse or Co Owner _____ email _____

Home Address _____

Phone _____ work phone _____

Spouse or Co Owner phone _____ work phone _____

List all minors in household(required for pool use)

- 1. _____ D.O.B. ___/___/___
- 2. _____ D.O.B. ___/___/___
- 3. _____ D.O.B. ___/___/___
- 4. _____ D.O.B. ___/___/___
- 5. _____ D.O.B. ___/___/___
- 6. _____ D.O.B. ___/___/___

Please list additional names:

In consideration for being granted pool/recreational facilities access, I agree that the use of all facilities is at the sole risk of the user. I further understand that the use of all facilities is unsupervised and that accident, injury or death may result as a result of use. I hereby agree to defend, indemnify, and hold harmless the Association, its agents, and employees from and against any and all claims, demands, causes of action, and/or liability associated with use of pool or other recreational facilities by myself, my family members, guests, tenants, and invitees.

The undersigned has read and will comply with all posted rules.

Signature(s) _____ Date ___/___/___

_____ Date ___/___/___

Please email this form to : nicole@beckandco.com

