

**Secret Cove Civic Association
Pool Release Form**

Please complete and return with your annual dues payment

I, the undersigned have received a copy of the Secret Cove Civic Association's Pool Regulations (provided in the neighborhood directory.) My family and I have read and understand these rules and regulations and agree to fully abide by them.

I understand that I am solely responsible for the safety of myself and any member of my family, and any guest of my family, or myself while we are using the swimming pool or facilities of Secret Cove Civic Association. I hereby release the Secret Cove Civic Association from any liability for death, personal injury, or property while using or occupying the swimming pool or other facilities owned and operated by the Secret Cove Civic Association. I hereby release and waive any subrogation rights. I further understand that this release will remain in effect as long as I use the Secret Cove Civic Association facilities.

_____ for myself and the _____ family.

Signature

Family Name

Please Print Name Here

Telephone Number

Date

Print Your 5-Digit Pool Key Number: _____

NOTE: Pool Keys are numbered "6A* _ _ _ _ _" See Example ➡

6A*10100 11101869234-1

Please check one:

_____ I have a pool key from last year.

_____ I lost my pool key and will need a replacement. Enclosed is \$10.00.
(Contact Peter Carnochan 737-9667)

_____ I am a new Pool Member and will need a key.
(Contact Peter Carnochan 737-9667)

Please allow at least a week from the time that you have paid the Treasurer prior to expecting Peter to provide the Pool Key. The Treasurer has to process the payment and notify Peter before a key can be issued.

Please send checks to:
P.O. Box 550706
Jacksonville, FL 32255-0706

OR

Venmo to @Secret-Cove

For the safety of all pool members and guests, SCCA employs security cameras at the Park House Entrance and in the Pool Deck area.