

# Five Fountains

Condominium Association, Inc.

1625 North Murray Boulevard • Colorado Springs, Colorado 80915

Unit Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Number in households: \_\_\_\_\_

Owner or Renter: \_\_\_\_\_

## Pool Release Form

The undersigned understands that use of the Five Fountains Condominium Association (FFCA) pool is at their own risk and agrees to hold harmless FFCA for bodily injury to themselves, their guest, lessee's, assigns or other invited parties.

The undersigned understands that FFCA IS NOT responsible for ANY bodily injury to any user of the FFCA pool, safety equipment, or fixtures accessible to users of the FFCA pool.

- FFCA assumes nor implies any responsibility for the conduct of any individual using the pool or fixtures.
- No lifeguard will ever be on duty, but safety equipment will be present as required by statute.
- The undersigned agrees to abide by the Rules and Regulations established by FFCA governing pool use.

The undersigned understands that signing this Release Form qualifies him/her for free access to the FFCA pool during authorized hours of the day.

- There is a 4-person limit on guests outside of individuals that live within your unit.
- No glass or breakable objects of any kind are permitted.
- All trash and pool items must be cleaned and picked up before you leave the pool area.
- No smoking or drugs of any kind are prohibited in the pool area.
- Appropriate swimwear must always be worn.
- Any music or audio equipment may only be used at low volume not to disturb others.

Failure to sign this required Release Form will deny access to the pool. Violations will be enforced in accordance with the Rules and Regulations of FFCA.

Pool Hours: Sunday-Saturday 9:00 A.M. to 8:00 P.M.

Print undersigned name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Representative name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

An authorized representative or Board member of FFCA