



Timberlane Homes Association Inc.
Professionally Managed by Agynbyte LLC

POOL USE FORM

Complete & Return for Pool Use

1. Please complete this form and return to the Timberlane Business Office (Agynbyte LLC), to register your household members to use the pool.
2. The Timberlane Pool is for Members, Residents and their Guests.
3. Homeowner account must be in good standing. This includes landlord & tenants situations.
4. Pool Use Form – Adults, who wish for their household members to use the pool, must complete the pool use form and identify the members of your household. Children of appropriate age, need to be added to the approved pool list in order to swim without their parent. **(Please note: your Form from last year is VOID. You will need to resubmit a NEW form for this year).**
5. Current Identification by member/resident is required in order to access the pool (Driver’s License, State ID, School ID card).
6. Member/Resident must be present with guests at all times.
7. **No more than two (2) guests per household are allowed;** provided guests are signed in by a registered household ADULT member. Exceptions may be considered on a case-by case basis at the time of check-in.
8. There are a limited amount of lockers available; you will need to supply your own padlock. Lockers are for day use only.
9. **Pool Use Forms MUST BE submitted to the Business office, by Noon on Monday, before the start of the swim week (Thursday – Monday). REGISTRATION FORMS WILL NOT BE ACCEPTED AT THE POOL OFFICE.** Only ONE form is needed for the season.

Homeowner Name:		Lot #:	
Homeowner Phone Number:		Homeowner Email:	
Timberlane Address:		Covington, WA 98042	
Tenant Name:		Tenant Phone:	
Household Members Names (Age is only needed for members under 21):			
1)	Age:	5)	Age:
2)	Age:	6)	Age:
3)	Age:	7)	Age:
4)	Age:	8)	Age:

Please read and *Initial* Below:

_____ I have reviewed the Timberlane Pool Rules with all members of my household and agree to abide by the Rules during pool use.

_____ I acknowledge that this is a “Swim at Your Own Risk” Pool and that there is “No Life Guards on Duty”.

Member/Resident Signature		Printed Name		Date	
Tenant Signature		Printed Name		Date	

This Form Must Be Returned to the Agynbyte Business Office, by noon on Monday before the use of the pool:

REGISTRATION FORMS WILL NOT BE ACCEPTED AT THE POOL OFFICE

Timberlane HOA
c/o Agynbyte LLC
1800 136th PI NE #101
Bellevue, WA 98005

Office Hours: 9am – 5pm / Monday - Friday
Phone: 425.747.0146
Fax: 425.747.4169
Email: service@agynbyte.com

OFFICE USE ONLY: Rcv'd Date: _____ Validated By: _____