

The Gentry Homeowner's Association, Annapolis, MD

2010 POOL PASS APPLICATION

PLEASE PRINT CLEARLY

PROPERTY ADDRESS: _____ Gentry Ct, Annapolis, MD 21403

PROPERTY OWNER: _____

PROPERTY OWNER CONTACT NUMBERS: PLEASE PRINT

Home: _____ Work: _____

Cell: _____ Emergency: _____

As homeowner I affirm that all persons listed below are residents of my property described above and I agree to provide proof of same upon request. I understand that each pass holder must abide by the pool rules and that failure to do so may result in revocation of pool privileges. I understand that as property owner, I am responsible for the actions and any property damages by my family, tenants and guests.

Property Owner

Signature _____ Date: _____

Please Print TENANT (LEASE HOLDER) NAME:

Home: _____ Work _____

Cell: _____ Emergency _____

As Tenant/Resident I affirm that all persons listed below are residents of the property described above and I agree to provide proof of same upon request. I understand that each pass holder must abide by the pool rules and that failure to do so may result in revocation of pool privileges. I understand that I must abide by all the rules and regulations of The Gentry Homeowner's Association and I am responsible for the actions and any property damages by my family, the residents of this property and my guests.

Tenant Signature _____ Date: _____

PROCOM

Professional Community Management, Inc.

1111 Benfield Blvd. Suite 110
Millersville, Maryland 21108
(301) 261-0777 (D.C. Line)
(410) 721-0777 (Local)
(410) 721-4854 (Fax)
www.procomgt.com



Side 2 The Gentry Homeowner's Association 2010 Pool Application.

Please PRINT the FIRST AND LAST NAME, the AGE and EMERGENCY TELEPHONE NUMBER for each person authorized to use The Gentry Pool.

Enter "A" FOR ADULT- (20 years and older)

Enter the age of each person under 20 years of age.

FULL NAME	Age	Emergency Number
1 _____	_____ ()	_____
2 _____	_____ ()	_____
3 _____	_____ ()	_____
4 _____	_____ ()	_____
5 _____	_____ ()	_____
6 _____	_____ ()	_____

For the safety of our residents and guests, ALL information requested on this 2 sided application is required. If the form is incomplete pool passes can not be provided to you. If you have questions, please contact Kerrie Wilson, 410-721-0777 ext. 137 or via email at KWilson@procomgt.com.

When the form is completed, PLEASE RETURN TO:

The Gentry Homeowner's Association
C/o Ms. Kerrie Wilson
ProCom Management
1111 Benfield Blvd, #110
Millersville, MD 21108

Fax 410.721.4854 or Email KWilson@procomgt.com

REMEMBER:

- Each unit will receive two (2) guest passes. Additional guest passes may be granted upon written request.

-All signed/completed applications must be received no later than **May 17, 2010** to receive prior to the Memorial weekend opening.

-All HOA accounts must be paid in full in order to receive pool passes.

PROCOM

Professional Community Management, Inc.

1111 Benfield Blvd. Suite 110
Millersville, Maryland 21108
(301) 261-0777 (D.C. Line)
(410) 721-0777 (Local)
(410) 721-4854 (Fax)
www.procomgt.com



PROCOM

Professional Community Management, Inc.

1111 Benfield Blvd. Suite 110
Millersville, Maryland 21108
(301) 261-0777 (D.C. Line)
(410) 721-0777 (Local)
(410) 721-4854 (Fax)
www.procomgt.com

