

MASTERSON STATION NEIGHBORHOOD ASSOCIATION

328 Masterson Station Drive • Lexington, KY 40511

859.246.0911 • www.mastersonstation.org

2017 POOL MEMBERSHIP APPLICATION

Office Use Only:	
Date	
Amount	
Check #	

Name: _____

Address: _____

Phone #: _____ E-mail: _____

MEMBER INFORMATION: Membership is available ONLY to those living at the above address. All lines must be completed and proper copies of photo IDs, as outlined in the pool fee structure sheet, must be submitted with application.

First Name	Last Name	D.O.B.	Gender	Pool Pass # - For Office use only

EMERGENCY CONTACT: Please provide at least one emergency phone number. In the event of an emergency involving you or your dependent, it is important that we have an emergency contact number.

1) Contact Name: _____ Phone #: _____

2) Contact Name: _____ Phone #: _____

MEMBERSHIP AGREEMENT/MEDICAL WAIVER:

It is understood and agreed that pool membership is non-transferable and dues non-refundable. Membership does not confer any ownership of the pool property or assets. The member and guests of the member shall save and hold harmless Masterson Station Neighborhood Association, Inc. and Professional Pool Management from and against all liability, claims and demand on account of personal injuries (including, without limitations to the foregoing workmen's compensation and death claim) or property loss or damage of any kind whatsoever which may arise out of or be in any manner connected with the performance of this contract, regardless of whether such injury, loss or damage shall be caused by or be claimed to be caused by, the negligence of the member or of the above named or by any of their agents or representatives.

It is also understood and agreed to by this applicant that any error, omission, misstatement, misrepresentation of material fact, with or without intent, shall constitute sufficient grounds for the revocation of this membership without refund.

The undersigned agrees to conform to and be bound by the Rules and Regulations of the Pool, as they may be amended from time to time. I, the undersigned, have read and understand the above mentioned rules and regulations.

Signature: _____ Date: _____

Please submit this application with a check made payable to MSNA in the amount outlined on the fee sheet and mail to: Masterson Station Neighborhood Association, Inc., 328 Masterson Station Drive, Lexington, KY 40511. Or attend one of the pool membership dates outline in the information packet. If you have questions, please call 859-246-0911.