

**FISHHAWK RANCH
COMMUNITY DEVELOPMENT DISTRICT**

AMENITY FACILITIES ACCESS CARD REGISTRATION FORM

NAME: _____ **DOB IF UNDER 18:** _____

ADDRESS: _____

HOME PHONE: _____ **CELL PHONE:** _____

EMAIL ADDRESS: _____

Facility Access Card Number Assigned: _____
(To be completed by District Staff)

ACCEPTANCE:

I acknowledge receipt of the Facility Access Card identified above and that the above information is true and correct. I understand that I have willingly provided all the information requested above and that it may be used by the Fishhawk Ranch Community Development District ("the District") for various purposes. I also understand that by providing this information it may be accessed under Public Records Laws. I also understand that I am financially responsible for any damages caused by me, my family members or my guests and the damages resulting from the loss or theft of my Facility Access Card. It is understood that Facility Access Cards are the Property of the District and are non-transferable except in accordance with the District rules, policies and/or regulations and may be retained by District Staff if improperly used. In consideration for the admittance of the above listed persons and their guests into the facilities owned and operated by the District, I agree to hold harmless and release the District, its agents, officers and employees, the Fishhawk Ranch and the Starling at FishHawk Ranch Homeowner's Association, its agents, officers and employees from any and all liability for any injuries that might occur in conjunction with usage of amenity facilities (Including but not limited to: fitness rooms and equipment, swimming pools, tennis courts, playground equipment, clubhouse space). Nothing herein shall be considered as a waiver of the Districts sovereign immunity or limits of liability beyond any statutory limited Waiver of immunity or limits of liability which may have been adopted by the Florida Legislature in Section 768.28 Florida Statutes or other statute.

Signature of Patron
(Parent of Legal Guardian if Minor)

Date

RECEIPT OF DISTRICT RULES AND RATES:

I acknowledge that I have been or will be provided a copy of the Rules and Rates for all Amenity Facilities via the email address provided above.

Signature of Patron
(Parent of Legal Guardian if Minor)

Date

GUEST POLICY:

Please refer to a copy of the Rules and Rates for all Amenity Facilities for the most current policies regarding guests.