

MAPLEWOOD PARK APARTMENTS POOL RULES

HOORAY! THE POOL SEASON OF 2023 IS FINALLY APPROACHING! THE FOLLOWING ARE POOL RULES THAT ARE TO BE FOLLOWED FOR YOUR SAFETY AND ENJOYMENT THIS SWIMMING SEASON.

PLEASE CHECK IN WITH THE POOL ATTENDANT AND SIGN IN!!!!

- 1. THE POOL IS FOR MAPLEWOOD PARK RESIDENTS ONLY!! ALL OTHERS WILL BE ASKED TO LEAVE. ALL RESIDENTS MUST REGISTER AT THE OFFICE MONDAY THROUGH FRIDAY, 9am-5pm TO RECEIVE A POOL PASS. IF YOU HAVE NO PASS, YOU CANNOT SWIM!!!!**
- 2. TWO GUESTS ARE ALLOWED PER FAMILY. NO EXCEPTIONS. YOU MUST ACCOMPANY YOUR GUESTS WHEN THEY USE THE POOL, OR WEIGHT ROOM. YOU MUST BE 18 YEARS OR OLDER TO BRING A GUEST WITH YOU.**
- 3. ALL CHILDREN 16 YEARS OR YOUNGER MUST BE ACCOMPANIED BY THEIR PARENT OR OTHER RESPONSIBLE ADULT FROM THE HOUSEHOLD. NO EXCEPTIONS!!!!**
- 4. NO GLASSWARE** of any type will be permitted on pool premises at any time.
- 5. NO ALCOHOLIC BEVERAGES** WILL BE PERMITTED ON THE POOL PREMISES AT ANY TIME!!!! NO ONE UNDER THE INFLUENCE OF ALCOHOL WILL BE PERMITTED TO ENTER THE POOL AREA.
- 6. NO BICYCLES OR PETS** OF ANY KIND ARE PERMITTED INCLUDING ROLLERBLADES AND SKATEBOARDS.
- 7. ALL SMALL CHILDREN MUST WEAR BATHING SUITS. ALL ADULTS MUST WEAR APPROPRIATE ATTIRE. NO CUT OFFS.**
- 8. NO PROFANITY** WILL BE TOLERATED FROM EITHER ADULTS OR CHILDREN.
- 9. ADMISSION WILL BE REFUSED TO ALL PERSONS HAVING ANY INFECTIOUS DISEASE, SORE OR INFLAMED EYES, COLDS, NASAL OR EAR DISCHARGES OR ANY KNOWN COMMUNICABLE DISEASE. PERSONS WITH OPEN SORES OR BANDAGES OF ANY KIND WILL NOT BE PERMITTED TO USE THE POOL.**
- 10. ALL TRASH ARE TO BE PLACED IN THE PROPER RECEPTACLES.**
- 11. ALL ACCIDENTS MUST BE REPORTED TO MANAGEMENT.**

MANAGEMENT RESERVES THE RIGHT TO DENY THE USE OF THE POOL TO ANY PERSONS FAILING TO OBSERVE AND ABIDE BY THESE RULES AND REGULATIONS. THE MANAGEMENT RESERVES THE RIGHT TO PERMANENTLY DENY THE USE OF THE POOL TO ANY VIOLATORS.

MANAGEMENT ASSUMES NO RESPONSIBILITY FOR ANY ITEMS LEFT IN THE POOL AREA!

**MAPLEWOOD PARK APARTMENTS
POOL REGISTRATION**

Head of Household _____

Address _____

**LIST ALL THAT OCCUPY THE APARTMENT (MUST
COINCIDE WITH THE LEASE!!!!!!)**

NAME

DOB

**WE HAVE READ THE RULES AND UNDERSTAND THAT THEY
ARE THERE FOR OUR SAFETY AND THE COMMUNITY'S
BEST INTEREST.**

HEAD OF HOUSEHOLD SIGNATURE