



POOL INFORMATION SHEET REGISTRATION FORM

Lot # if known: _____ Date of Purchase: _____

HOMEOWNERS:

Last Name First Name Primary Contact Number

Last Name First Name Primary Contact Number

ADDRESS: _____ Brandon, MS 39047

EMAIL 1: _____ EMAIL 2: _____
Print Neatly Print Neatly

CHILDREN: _____
Full Name Age

Full Name Age

Full Name Age

Full Name Age

Children under the age of 16 must be accompanied by an adult resident

THIS INFORMATION WILL BE USED TO CONTACT YOU IN THE RESPECT TO MATTERS RELATING TO THE AMENITIES OR IN THE EVENT OF AN EMERGENCY

IN AN EFFORT TO RESTRICT USE OF THE FACILITIES TO HIDDEN HILLS RESIDENTS, THIS FORM MUST BE RETURNED BEFORE USE OF THE POOL IS GRANTED

[Type text]