



Member Enrollment & Access Credential Activation Form

To be completed for enrollment to receive an Access Credential for each Benefitted Lot, owner, resident and tenants with transferred Membership for Clubhouse use.

***** Please Print ****

PropKey: _____	Neighborhood: _____
VSF Property Address _____	
Member LAST & FIRST Name _____	
Telephone # _____	
Email Address _____	

I authorize my Teen Member to receive an access credential and I assume full responsibility for their unsupervised actions. Teen Parent signature: _____

Minor Children 14 and under :	
Full Name	Full Name
1	4
2	5
3	6

I assume full responsibility for all of my designated residents, teens and children while using the Clubhouse and any damages they may cause. I've also received and agree to abide by the VSF Clubhouse Rules & Guidelines.

Signature _____

Date: _____ **Are you the Owner?**

Clubhouse Use

	Member Type	Group Access
Owner Register Verified		
ID Verified		Batch & Card/Credential #
Transfer of Membership		# _____
Access Device Type		Photo On File
Initials:	Processed Date:	

Clubhouse Use		
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