

CASTEEL HEIGHTS
Homeowners Association, Inc.
Recreational Membership Contract Year 2023/2024

Casteel Heights Homeowners Association, Inc. (CHHA) and the Homeowner enter into this Recreational Membership Contract on the

_____ day of _____, 2023, as follows:

1. **Fee.** For a fee of **\$465**, the Homeowner(s) and family of Homeowner(s) are entitled to use the CHHA swimming pool, tennis courts, and other recreational facilities subject to the rules and regulations of CHHA.
2. **Term.** Membership is from May 1, 2023 – April 30, 2024
3. **CHHA Member(s) agree that:**
 - A. they, their family, and guests will use CHHA recreational facilities at their own risk.
 - B. they are personally responsible for informing all of their guests that using CHHA recreation facilities is undertaken at the guest's own risk.
 - C. no children (family member or guests) younger than 14 years old shall be allowed in the pool area without adult supervision.
 - D. no pets/animals are allowed in the pool and/or the pool area.
 - E. Non-Member homeowners (including children) are not permitted at the recreation facilities as guests of a Recreation Member.
 - F. Members agree to treat the facilities with care and abide by the CHHA rules or face possible revocation of membership privileges.

This contract is subject to and shall be governed by the CHHA By-Laws, Covenants and rules established by the Board of Directors (available at <http://www.casteelheights.com>).

Agreed this _____ day of _____, 2023.

Homeowner signature

President, CHHA, Inc.

INSTRUCTIONS

1. Read contract.
2. Fill out "Recreational Membership Contract Year 2023/2024".
3. Sign contract.
4. Fill out "Application for Membership Year 2023/2024".
5. Determine membership status.

Return signed form and a check payable to CHHA, in the amount appropriate for your membership status, to the pool opening OR by mail before May 31, to:

Casteel Heights Homeowners Association
3891 Casteel Club Lane
Powder Springs, GA 30127

POOL WILL BE OPEN MAY 13 – OCTOBER 1, 2023

Name(s): _____

Please include both spouses, if applicable.

Address: _____

Phone: _____ **E-mail:** _____

Children (living at the residence above)

Age

Children (living at the residence above)	Age
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Fee Schedule

Circle Your Status

Fee

- Mandatory Membership

\$465

- Grounds Only Member

\$150

Resident