Buckingham Oaks Condominiums
Aurora, CO 80012

POOL OPENING

The swimming pool will open at 10:00 AM on Tuesday, May 28, 2019.

Your account must be current to access the pool.

KEYCARD ACTIVATION

Keycards will not be activated until the 2019 Pool Forms have been completed and submitted. The Pool Forms are available online at:

www.buckinghamoaks.org

Completed forms (You must complete both forms.) should be dropped in the HOA drop box located in the mail room across from the mailboxes. We try to activate cards within 24-48 hours of receiving the completed forms and verifying eligibility. Do not expect your card to be activated the same day.

KEYCARD DEACTIVATION

IF YOU FAIL TO FOLLOW THE RULES; YOUR CARD WILL BE DEACTIVATED! Keycards will have pool access turned off should the unit become delinquent or if any violation of the published rules occurs. This includes allowing anyone access to the pool who does not have a working keycard. IF A KEYCARD DOES NOT WORK, THAT PERSON MUST CONTACT BOB ONSITE OR CALL MANAGEMENT at 303-337-5811 during regular business hours. Use of the Maintenance Emergency Pager to report keycard problems will result in the addition of a $25.00 charge to the reactivation of the card.

Lost keycards will be deactivated prior to the issuance of a new keycard. Replacement keycards cost $25.00.

Buckingham Oaks Condominium Association

Pool Rules

1. The pool is open only between the hours of 10:00 AM. through dusk.
2. The pool is reserved for the use of Buckingham Oaks residents and their guests
3. **Please keep the gates to the pool closed at all times.** Do not let anyone in; all residents should have their own pool keycards. Failure to follow this rule WILL result in the deactivation of your keycard.
4. No more than two (2) guests per household. Guests are not allowed in the pool area without being accompanied by a resident. Residents are responsible for their guest's behavior at all times.
5. Residents of 13 years of age or younger must be supervised at all times by an adult (18 years or older). Verifiable proficiency exceptions must be approved in advance.
6. No running, jumping, diving, fighting, or dangerous conduct is allowed in or around the pool area. Any excessive noise is forbidden in or around the pool area.
7. Residents and their guests are required to be properly attired at all times going to and from and in and around the pool area. No flashing of inappropriate body parts or Aurora Police Department will be contacted immediately.
8. Diapers, whether cloth or disposable, must be covered with rubber pants.
9. Persons having infectious diseases, open sores, bandages, cuts or recent vaccinations are not permitted within the pool area.
10. All refreshments must be served in unbreakable containers. GLASS OBJECTS ARE NOT PERMITTED IN THE POOL AREA AT ANY TIME.
11. NO ALCOHOL may be consumed in or around the pool area.
12. Pets are not allowed in the swimming pool area.
13. NO LIFEGUARD WILL BE ON DUTY.
14. Everyone must obey all directives from BOCA agents including Board Members, pool staff, and management. Failure to do so is not acceptable and may result in pool card deactivation or fines.
15. Management assumes no responsibility for accident or injury and is not responsible for articles that are lost, damaged or stolen. POOL IS USED AT YOUR OWN RISK.
16. Residents and their guests must abide by all rules posted in or around the pool area and should observe any warning signs placed in or around the pool area.
17. The pool furniture is to stay on the pool deck; anyone observed throwing pool furniture into the pool will result in pool card deactivation or fines.
18. Throwing rocks in pool area or into the pool will not be tolerated. Pool card will be deactivated for a minimum of 30 days and fines may be assessed
19. Every homeowner will use appropriate language around pool area. Foul language is not acceptable and may result in pool card deactivation or fines.
20. NO barbecues are allowed inside the pool area.

Please keep the gates to the pool closed at all times. Do not let anyone in. Each resident must have his own keycard and must use it to enter the pool.

Buckingham Oaks

934 S. Peoria St. Aurora, Colorado 80012 Tel: (303)337-5811 Fax: (303)337-4961

Unit #_____ 5-digit Card #_____

SWIMMING POOL
RELEASE OF LIABILITY

READ THIS RELEASE CAREFULLY, ASK ANY QUESTIONS BEFORE SIGNING, AND RETAIN A COPY. YOUR SIGNATURE ACKNOWLEDGES YOU UNDERSTAND THE RELEASE, BELIEVE IT TO BE FAIR AND REASONABLE, AND AGREE TO ITS TERMS.

I/We (Print) _____do hereby state that I/we have read and agree to the swimming-pool rules and further understand that any infraction of these rules or delinquency in Association fees will result in immediate suspension of privileges to use the pool for either me or my/our family, guests, or tenants. I/We knowingly accept and assume all risks in using the swimming pool.

I/We hereby release and agree to defend, hold harmless, and indemnify the Association, its Board of Directors, Owners, Agents, Employees and Assigns, from all actions, judgments, damages, claims of any kind, and expenses including attorney fees, that may arise from usage of the swimming pools or other common elements, including personal injuries or death, either by me or by my/our family, guests, and tenants. This Release shall bind me, my family, tenants, guests, heirs, successors or assigns.

LIST NAMES OF ALL RESIDENTS	BIRTH DATES FOR THOSE UNDER 21
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

SIGNATURE_____ DATE_____

PRINTED NAME _____

CELL PHONE_____

BUCKINGHAM OAKS ACCESS FORM
(This form must be updated annually for pool access)

Please print

UNIT NUMBER: _____

Check one:

☐ **Owner**

☐ **Renter**

CELL-PHONE NUMBER: _____

DRIVER'S LICENSE #_____

NAMES OF ADULTS (18+) LIVING IN UNIT/ CELL-PHONE NUMBER:

_____/ _____CELL PHONE

_____/ _____CELL PHONE

_____/ _____CELL PHONE

_____/ _____CELL PHONE

NAMES / AGES OF CHILDREN (17 AND UNDER) LIVING IN UNIT:

1. _____/_____AGE

2. _____/_____AGE

3. _____/_____AGE

NON-OWNER RESIDENTS MUST PROVIDE PROOF OF RESIDENCY SUCH AS DRIVERS LICENSE, LEASE, OR CURRENT XCEL-ENERGY BILL.

BY SIGNING BELOW, AND BY ACCEPTING THE ACCESS CARD FOR MY UNIT, I HEREBY AGREE TO ABIDE BY THE PRINTED AND POSTED POOL RULES FOR BUCKINGHAM OAKS. I UNDERSTAND THAT I AM RESPONSIBLE FOR THE BEHAVIOR OF MY GUESTS. I ALSO AGREE TO ABIDE BY ANY DIRECTIVE OF BUCKINGHAM OAKS EMPLOYEES, MANAGEMENT OR BOARD MEMBERS INCLUDING LEAVING THE POOL AREA WHEN REQUESTED.

_____ _____

RESIDENT SIGNATURE **DATE**