ANASAZI
VILLAGE

Tenant Registration Form

Landlord:

Name:_____

Address:_____

Phone:_____ Email:_____

Terms of Lease:

From:_____ To:_____

Anasazi Village Property Address:_____

Name of ALL Tenants:_____

Tenants:

Name:_____

Phone:_____ Email:_____

Vehicle Information:

Make:_____ Model:_____ Color:_____ Plate #:_____

Name:_____

Phone:_____ Email:_____

Vehicle Information:

Make:_____ Model:_____ Color:_____ Plate #:_____

Name:_____

Phone:_____ Email:_____

Parking Pass Information:

Make:_____ Model:_____ Color:_____ Plate #:_____

I understand that the use of the Anasazi Village Condominiums recreational facilities and services (including, but not limited to) the Anasazi Village Community Center, swimming pools, fitness center, etc. naturally involves the risk of injury. By signing this document and/or participating in the use of such facilities and services, I understand and voluntarily accept the risk and agree that Anasazi Village Condominiums, AAM, LLC, all affiliates and their respective shareholders, members, directors, officers, employees, agents, and contractors will not be liable for any injury, including without limitation, personal, bodily or mental, economic loss or any damage to me, any relative, or guest resulting from negligence, or other acts of anyone using the facilities except to the extent directly resulting from the gross negligence or willful misconduct of Facilities Operator or Its employees. If there is any claim by anyone based on any injury, loss or damage described herein, which involves me, I agree to (1) defend Anasazi Village against such claims and pay Anasazi Village for all expenses relating to claim and (2) indemnify Anasazi Village for all liabilities to me, my spouse, unborn child, or relatives or anyone else resulting from such claims. Further, represent that I am in good physical conditions and have no medical reason or impairment that prevents my intended use of Anasazi Village Condominiums facilities-and services. I know that Anasazi Village Condominiums did not and cannot give any medical advice. I will discuss with my doctor any health or medical concerns that I have now or after I join, before using the Anasazi Village Condominiums facilities and services.

Tenant Signature:_____ Date:_____

I hereby assign-for the term of the lease- all of the "use privileges" for the Community Center/Play Pool to, the Tenant identified in this Application, .Such temporary assignment shall continue per the above lease terms unless revoked by me-by written notice to the Anasazi Village Condominiums Office staff. I understand that neither my guest(s) nor I may use the Community recreational facilities during the term of this assignment. I remain responsible for payment of all assessments during the term of this assignment.

Landlord Signature:_____ Date:_____

Anasazi Village Condominium Homeowners Association
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