

THE RACQUET CLUB OF FORT LAUDERDALE ASSOCIATION, INC.

c/o Real One Property Management

Phone: 866-205-2250 | Fax: 888-436-0522

info@realonepm.com | www.realonepm.com

APPLICATION

Pet Registration

OFFICERS USE ONLY

Unit Number: _____ Application date: _____

Pending Document? _____ to be submitted by : _____

BOD reception of Application: _____

APPLICANT INFORMATION

APPLICANT:

Name _____/_____/_____
Date of Birth

Cell Phone Number _____
Home Phone

Email Address

Current Address _____
City, State, Zip Code

- Please attach Vaccination Records of your pet from Broward County or your Veterinary.

Is the Vaccination records attached to this application? YES____ NO____

PET

(No pets of any kind are permitted on Common Property unless on a leash)

1-

Type of Pet Breed Color Age Sex Weigh

2-

Type of Pet Breed Color Age Sex Weigh

To: The Board of Directors
The Racquet Club Of Fort Lauderdale Association, Inc.

Gentlemen:

In requesting this permission (and, if granted, in accepting it) I/we do so subject to all of the following provisions, which provisions /we fully understand and by which I/we agreed to be fully bound.

The described is the only for which such permission is requested (or may be granted) and that at any time and through any circumstances I/we no longer own said pet it will, under no condition, be replaced by another without first obtaining the written

Applicant Signature _____
Date