



Facility Tenant Privileges Registration Form

Request for Temporary Privileges

(To be completed by Legal Homeowner(s))

Date Received: _____
Employee: _____

Section 1: Homeowner's Information

Newtown Property Address: _____

Aiea, Hawaii 96701

Legal Owner's Full Name: _____ Phone #: _____

Phone #: _____

Mailing Address: _____

City _____ State _____ Zip Code _____

Email Address: _____

Emergency Contact: _____ Phone #: _____

Agent Information

Name: _____ Phone #: _____

Company: _____ Phone #: _____

Company Address: _____

City _____ State _____ Zip Code _____

Email Address: _____

Section 2: Tenant Information

Attach lease agreement and list below names of each household member ages 1 year & older **listed on the attached lease agreement** who wish to have Rec Center privileges.

First Name	M.I.	Last Name	Sex	Birth Date
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Additional Facility Privileges Request:

If there are more than six (6) members listed in Section 2 above, the NECA General Manager will review the information prior to facility privileges being approved. The General Manager will insure all persons listed in Section 2 above officially reside at the Newtown residence listed in Section 1.

General Manager Approval Signature: _____ Date _____

I (We) request temporary privileges for my/our tenant to be effective during the period below:

_____ Month Day Year	To	_____ Month Day Year
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I (We) the Owner(s) of the above NECA property agree to waive all privileges to the Newtown Rec Center and assign these privileges to the Tenant(s) listed in Section 2 and on the attached lease agreement. By relinquishing these privileges, I (We) understand I am (we are) not entitled to receive any Rec Center privileges. A \$20.00 transfer fee will be assessed to cover the processing cost for each transfer or renewal of Rec Center privileges.

I (We) understand registration will be issued only to the Tenant(s) listed in Section 2 and on the accompanying copy of the lease agreement and currently residing at the NECA address above. Rec Center privileges will expire at the end of the term of the lease agreement.

I (We) understand as Owner(s), will be held accountable for any theft, damage, or injuries at the Newtown Rec Center caused by my/our Tenant(s).

I (We) further understand I (We) will continue to be responsible for payment of the Association's assessment dues, including late charges and collection costs if the assessment becomes delinquent, pursuant to the Newtown Estates Master Declaration of Covenants, Conditions, and Restrictions, Article VI.

Owner's Signature: _____ Date: _____
 _____ Date: _____
 Agent's Signature: _____ Date: _____

For Office Use Only:

List Residency Document Type for each person residing in Section 1	
1	6
2	7
3	8
4	9
5	10

FOR OFFICE USE ONLY:

Amount:	Receipt #:	Date:	Employee:
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