



Quail Creek Country Club POA Guest Registration Request

The Guest Registration Request form must be completed by the Resident, Associate Member or Renter requesting registration. Guests are registered at the Member Services Desk in the Madera Clubhouse, Monday-Friday 8:00am to 3:00pm. Guest Pass cards are only issued to Guests who are present at the Member Services desk as a picture must be taken and a liability waiver must be signed. Guests who arrive when the Member Services desk is closed may go to the Anza Fitness Center for a temporary Guest Pass card. If issued a temporary Guest Pass card, the Guest must visit the Member Services Desk on the next business day in order to complete registration.

The following guidelines are from the Quail Creek CC POA Rules. Please read carefully prior to submission:

- Complimentary Guest Pass cards must be applied for by a Resident, Associate Member or Renter.
- Members, Renters and Associate Members are responsible for making their Guests aware of the club policies, rules and dress codes.
- Guest Pass cards are issued for a maximum of fifteen (15) days and can be renewed for an additional fifteen (15) days during any twelve (12) month period.
- Extended Guest Pass cards must be applied for by a Resident, Renter or Associate Member: 30-60 days \$150.00 or 60-90 days \$250.00. Any Guest staying longer than 120 days including the complimentary guest period will be required to get an associate membership.
- A Guest must have a valid Guest Pass card in his/her possession while using the facilities or be accompanied by the Homeowner, Association Member or Renter with whom they are staying with.
- Children under the age of 18 must be accompanied by an adult Homeowner, Associate Member or Renter, or adult Guest with a valid Guest Pass card at all times when using the facilities.

Resident/Associate Member/Renter Member Number: _____

Name: _____

Address: _____

Phone Number: _____

Guest Name:

Relationship:

Gender: M F

Gender: M F

Gender: M F

Gender: M F

Gender: M F

Length of Visit: From _____ **To** _____

Resident/Associate Member/Renter Signature: _____