Joan McKenna’s Proposal was built upon Warren McKenna’s Proposal.

1. Bathrooms remain **open**.

2. Main Pool swimming only. **NO SPA. If you use the spa, you will be banned from using the pool until the end of the COVID-19 virus.**

3. No guests are allowed. **One family of 6 members at a time.** **No letting in your friends and neighbors. They each must reserve their own time on the website and sign a waiver.**

4. Residents are required to bring their own chairs **and towels.**

5. Residents are **required** to sign a liability waiver

6. Residents are required to reserve swim time in advance on the Website – **in 2-hour intervals. 2 days notice is required.**

7. Users must clean up after use. Cleaning supplies provided. **Before a family leaves the pool area, a pool committee proctor will check the area, including the bathroom. (The residents shall call the pool committee member assigned to their particular 2-hour interval.) The residents must be present for the after-usage inspection. If the area was not properly cleaned and we need to call the cleaning service, you will be charged for this on your monthly condo fee bill. The fee is $300. If you leave the area without receiving the inspection, your monthly condo fee bill will reflect an additional $300 cleaning fee.**

8. **No food or beverages in the pool area or you will be banned from using the pool until the end of the COVID-19 virus.**  **You may only bring plastic bottled water.**

**9. All children under the age of 16 need to be accompanied by an adult resident at all times in the pool area.**

**10. All users need to be listed on the Pool Rental Rules Agreement. These are the people who can come into the pool area during your 2-hour interval.**

**11. Once this is signed, the original goes to the assigned proctor before the scheduled 2-hour interval will begin. And a copy goes to the resident. The safe reopening plan will be found on the website.**

**Pool Users for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Time**

**1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 6.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Assigned Proctor Emergency Phone Number**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Responsible Resident Condo Address**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Resident Phone Number**