



Member Name & Acct# : _____

High Valley Country Club Unaccompanied Guest Registration

Today's Date _____ Cabin Street Address: _____

Guest(s) Names:

Guest Contact Number: Cell _____

Number in group: Adults _____ Children: _____

Date of Visit/Use From _____ To _____

(Please check one or both) Pool Golf **NO ADDITIONAL GUESTS ALLOWED**

I hereby give permission for the above guest (s) to use the High Valley facilities checked in on date(s) provided. I understand that as the member & lot owner; I am responsible for my guest's compliance with the rules and regulations of High Valley Country Club. I also understand that my guests will be charged a modest fee for use of the facilities. I must be able to be reached in case of emergency.

Member /Owner or Prop Management:

Please print name

Member/ Prop Mgr's Signature: _____

Member Phone # _____ **Email:** _____

Member Account Number or Lot Number: _____

Please email 2 days prior to arrival date: **HOA_Management@highvalleycc.org**

Thankyou