



RECREATION FACILITIES KEY
REQUEST FORM

Please return the completed form to: wlfivhoaconnections@gmail.com

Home Address: _____

Homeowner's Name: _____

Home occupied by: _____

Home Telephone: _____ Rental Property: _____

Date Issued: _____ Renter Deposit Paid : _____

I agree to abide by the Covenant and Restriction covering Woodlake Forest IV utilization of recreation facilities and understand that as a homeowner, I must return this key or pay the Woodlake Forest IV Association, Inc. (WFIV HOA) a \$100 fee if I sell or lease my home. Tenants deposit will be refunded by the Association within thirty [30] days after the key is returned.

Key Received By: _____

Key Return Date: _____