

A Sub-Associate is described as an individual over the age of twenty-one (21) who is an "immediate" family member of the Prime Member or Co-Owner who resides at the Prime Member's residence. The Authorized Member shall complete this application on an annual basis and must also provide proof of residency for the Sub Associate dated in the last 30 days. **Proof of residency is defined as a major reoccurring bill (i.e. utility, cell phone, car payment etc.), bank statement, pay check, or college transcript.**

**PRIME/CO-OWNER MEMBER INFORMATION**

Tract: \_\_\_\_\_ Lot: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**SUB ASSOCIATE MEMBER INFORMATION**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**SUB ASSOCIATE PRIVILEGES AUTHORIZED**

- |                                                                             |                                                          |                                      |                                                          |
|-----------------------------------------------------------------------------|----------------------------------------------------------|--------------------------------------|----------------------------------------------------------|
| Ability to Call Guests In<br>(including online call-ins)                    | <input type="checkbox"/> Yes <input type="checkbox"/> No | Issuance of 1 Motorcycle Decal       | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Issuance of 1 Vehicle Decal                                                 | <input type="checkbox"/> Yes <input type="checkbox"/> No | Issuance of 1 Annual Golf Membership | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Issuance of 1 CLPOA Member ID<br>(must be returned when membership expires) | <input type="checkbox"/> Yes <input type="checkbox"/> No | Issuance of 1 CLPOA E-Bike Tag       | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Issuance of 1 Golf Cart Decal                                               | <input type="checkbox"/> Yes <input type="checkbox"/> No | Issuance of 1 Pump Track Decal       | <input type="checkbox"/> Yes <input type="checkbox"/> No |

**NO SUB ASSOCIATE SHALL BE AVAILABLE OR GRANTED FOR A VACANT LOT.**

**APPLICANT'S SIGNATURE**

Sub Associate Member agrees to abide by all Canyon Lake Property Owners Association Rules & Regulations. The Authorized Member hereby authorizes the Canyon Lake Property Owners Association to grant the above authorized privileges and hereby assumes responsibility for said Sub Associate Member.

Sub Associate Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**EMAIL COMPLETED FORM TO [MEMBERSERVICES@CANYONLAKEPOA.COM](mailto:MEMBERSERVICES@CANYONLAKEPOA.COM)**