



Bonita Pines Club Inc.
C/O Capital Care Group, PLLC
3920 Via Del Ray, #3
Bonita Springs, FL. 34134
239-992-1973

RENTER/GUEST REGISTRATION FORM

Bonita Pines Club requires all renters and guests occupying a unit in the absence of the owner to complete this registration form. The minimum rental period is 30 days - maximum 6 months. The minimum period does not apply if occupant is a relative of the owner or non-paying guest. Please return completed form to our accounting office at the address listed above or email a scanned copy to Bridgette Sanford at bsanford@ccgcpas.com. This information will be retained by the BPC Board for Association use only.

Name(s) of Occupant(s): _____

Type of Occupant(s): _____ Renter, (30 day minimum)
_____ Renter, relative of owner (no minimum period)
_____ Guest, non-paying (no minimum period)

Dates of Stay: From _____ to _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Vehicle License #: _____ State: _____ Make: _____
(Please park in your unit's assigned numbered space or an unmarked space)

Emergency Contact Name: _____ Phone: _____
(We must have this information per FEMA requirement)

Unit Owner, Building and Unit #: (i.e. B-219) _____

I have received, read, and accept the Association's Rules and Regulations as listed in the Bonita Pines Phone Book and agree to abide by the rules during my/our occupancy. I also understand no pets are allowed on Bonita Pines property.

Signature: _____ Date _____

We welcome you and hope you enjoy your stay at Bonita Pines Club Inc. You have full use of our facilities and we encourage you to join in our social activities posted on your building's bulletin board.

Sincerely,
Bonita Pines Board of Directors

Rev. 9-25-18