

June  
259-567-7077

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# LEGENDS

Golf & Country Club

## MEMBERSHIP LEASE & MEMBERSHIP TRANSFER FORM

Member Number: \_\_\_\_\_ Lease Member Number: \_\_\_\_\_

Owners Name: \_\_\_\_\_

I HEREBY DELEGATE ALL PRIVILEGES ENTITLED TO ME BY MY  
MEMBERSHIP TO LEGENDS GOLF & COUNTRY CLUB TO MY TENANT:

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

The tenant will reside at my property located at:

\_\_\_\_\_ Legends Phone # \_\_\_\_\_

Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Tenant's Home Mailing Address: \_\_\_\_\_

Tenant's Home Phone Number: \_\_\_\_\_

Tenant's Mobile Number: \_\_\_\_\_

**Transfers must be a minimum of 30 days and a copy of the lease must be attached to this form.**

**There is a \$250.00 non-refundable transfer fee which should be paid to Legends Golf & Country Club by check. Paying in advance is encouraged as this will facilitate the transfer. No credit cards accepted. Please include this form filled out in its entirety with payment and signatures of both owner(s) and tenant(s).**

**Owner remains responsible for all dues and assessments and any unpaid charges resulting from the tenants use of the club.**

(over)

# LEGENDS

Golf & Country Club

## TENANT TRANSPONDER AUTHORIZATION

Membership Number: \_\_\_\_\_

Owners Name: \_\_\_\_\_

Legends Property Address: \_\_\_\_\_

Tenants Name: \_\_\_\_\_

Tenant will reside at the above Legends Property Address for the period of  
Begin Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

I hereby authorize my tenant to receive a transponder for the duration of his/her lease.

I fully understand that the transponder will be billed to my membership account in the amount of \$20.00 plus applicable sales tax per vehicle upon placement.

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Date

Tenant Vehicle Information:

### Vehicle #1

\_\_\_\_\_  
Make                      Model                      Year

### Vehicle #2

\_\_\_\_\_  
Make                      Model                      Year

\*In order to have the transponder assigned to your tenant's vehicle, the completed form must be turned into Noreen May, located in the Golf Pro Shop, prior to placement. Tenant must show evidence of Transfer Membership Card in the Legends and ownership of the vehicle, which could be the tenants registration or rental car agreement in which the transponder will be placed. This will be required at the time the transponder is placed in the windshield of the vehicle.

Date of Placement \_\_\_\_\_

Verified Registration

Tenant Verification of Placement

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Tenant Signature

*Lance*  
**Wyndham Bay of Legends Condominium Association**

**REQUEST FOR RENTAL LEASE APPROVAL**

**Please submit the following items to the current Management Company. These must be received at least ten (10) days prior to the rental start date:**

- 1) Fully completed 'Request for Rental Lease Approval' form
- 2) Fully executed Lease Agreement
- 3) \$50 Transfer Fee made payable to Wyndham Bay of the Legends Condominium Association

**Please Note:**

- The Board of Directors will not consider this Request if a signed Lease Agreement is not attached
- No lease may be for less than a thirty (30) day period
- No Unit may be sub-leased
- No pets of any kind are permitted in leased units
- No new tenants may move into Wyndham Bay without prior approval of the Board of Directors

**STREET ADDRESS:** \_\_\_\_\_ *Sherbrook Place*, **UNIT #** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**LEASE TERM:** From: \_\_\_\_\_, 20\_\_\_\_ To: \_\_\_\_\_, 20\_\_\_\_

**UNIT OWNER (LESSOR)**

**Name:** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

**Phone:** ( ) \_\_\_\_\_ **Fax:** ( ) \_\_\_\_\_

**RENTER (LESSEE)**

**Name(s):** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

**Vehicle (Make, Color, License #, State/Prov.):** \_\_\_\_\_

**Phone:** ( ) \_\_\_\_\_ **Fax:** ( ) \_\_\_\_\_

**Will anyone other than those listed above occupy this Unit?** \_\_\_\_\_ **No** \_\_\_\_\_ **Yes**

**If Yes, whom?** \_\_\_\_\_

**LEASING AGENT**

**Agency/Agent Name:** \_\_\_\_\_ **Phone:** ( ) \_\_\_\_\_

I have received and read a copy of the Wyndham Bay Association Rules and Regulations. I understand the Rules and Regulations, including those applicable to both the Unit and the Common Property, and agree to abide by them as long as I reside at Wyndham Bay. I understand that, as a Renter, failure to do so is cause for eviction.

\_\_\_\_\_  
**Renter's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_ **Unit Owner's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_  
**Licensed Realty Agent** \_\_\_\_\_ **Date** \_\_\_\_\_ **Board of Director's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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**REASON FOR REJECTION, IF APPLICABLE:** \_\_\_\_\_