

Old Key Number: _____

WICKHAM PARK HOA
Pool Gate/Cabana Bathroom Access Card
Receipt Acknowledgement

Name: _____

Address: _____

New Key Number: _____

Signature: _____

Date: _____

 : By signing this form you are requesting the access pool key to be
(Initial above) mailed and agree to take responsibility for the replacement cost of
key(s) if lost in the mail.

NOTE: ONE (1) ACCESS CARD ONLY PER HOUSEHOLD
WILL BE ISSUED – NO EXCEPTIONS.

Replacements: \$50.00

***** Please Submit Acknowledgement Receipt To:**

Sentry Management - Wickham Park HOA
Attn: Wickham Park HOA Manager
601 E. Oak Street
Suite C
Kissimmee, FL 34744

407-846-6323 #55005
407-846-0301 (fax)
mfigueroa@sentrymgt.com