



# FAIRLINGTON ARBOR

## Fairlington Arbor - 2026 Resident Registration Form

Dear resident (s), **please complete the information below (\*) and return it to the Management Office**, so that the parking space assignments can be confirmed, and the pool/tennis wristbands can be issued to each person residing in your unit. At this time, we are planning for the pool to be open starting on May 23, 2026. For your protection, no person will be allowed to use the pool without presenting the new 2026 pass. The Pool Rules will be posted at the pool house and on the Arbor's website: <https://arbordonline.net> or <https://portal.NRPartnersLLC.com> \_

**Unit Address:** \_\_\_\_\_ **Court #:** \_\_\_\_\_

**Name of Unit Resident(s):** \_\_\_\_\_

**Phone Number of Unit Resident:** \_\_\_\_\_ (H) \_\_\_\_\_ (C)

**Email Address:** \_\_\_\_\_

**Name of Unit Owner:** \_\_\_\_\_

**Email Address of Unit Owner:** \_\_\_\_\_

First and last name of all persons over 18 permanently residing within the unit:

1." \_\_\_\_\_ 2. \_\_\_\_\_

3." \_\_\_\_\_ 4. \_\_\_\_\_

First and last name of all minors permanently residing within the unit:

1." \_\_\_\_\_ , Age \_\_\_\_\_ 2. \_\_\_\_\_ , Age \_\_\_\_\_ "

3." \_\_\_\_\_ , Age \_\_\_\_\_ 4. \_\_\_\_\_ , Age \_\_\_\_\_

### Vehicle Information

Make/Model	Year	State	License #	Parking Space #

I understand that the pool/tennis wristbands are non-transferable. I have read the pool rules (available through the NRP Owner Portal under the "Documents" section) and agree to indemnify the Association and pool management company from any loss incurred due to my failure to comply with those rules. As a parent or guardian, I understand that my primary responsibility is for the individual's safety (s) under my care.

\_\_\_\_\_  
**Resident Signature(s)**

\_\_\_\_\_  
**Date**

**\*Please return the completed form by no later than Monday, May 18, 2026 to the Management Office\***