



# APPLICATION FOR RESIDENCY CYPRESS COVE MOBILE HOME PARK

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Date: \_\_\_\_\_

I agree to provide any additional information necessary to successfully complete this background research.

Applicant's Full Name \_\_\_\_\_

Co-Applicant/Spouse's Full Name \_\_\_\_\_

Married: Yes  No  If yes, how long? \_\_\_\_\_

Other names used in the past 10 years, please list:  
(Maiden name, Previous married names, etc.)

\_\_\_\_\_  
\_\_\_\_\_

## **HISTORY - 10 Years Needed (Attach sheet if necessary)**

### **Current Address: (No PO Boxes)**

Address \_\_\_\_\_ How long? \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: Res: \_\_\_\_\_ Cell: \_\_\_\_\_ Bus: \_\_\_\_\_ Fax: \_\_\_\_\_

Own \_\_\_\_\_ / Rent \_\_\_\_\_

### **If Renting:**

### **Landlord / Apartment Info:**

Name: \_\_\_\_\_  
(Last) ( First )

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: ( ) - \_\_\_\_\_ - \_\_\_\_\_

### **Previous Address: (No PO Boxes)**

**Attach sheet if necessary**

Address \_\_\_\_\_ How long? \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Own \_\_\_\_\_ / Rent \_\_\_\_\_

**Nudist History:**

Years involved in Nudism \_\_\_\_\_

**Where:**

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

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: ( ) \_\_\_\_\_

**Cypress Cove History:**

Are you a Cypress Cove Member? \_\_\_\_\_ If yes, how long? \_\_\_\_\_

Explain first visit, history with us etc. \_\_\_\_\_  
\_\_\_\_\_

**References: (Home Club)**

Name of Manager: \_\_\_\_\_

Address: \_\_\_\_\_

**References: (Previous/Current Adjacent Neighbor)**

Name: \_\_\_\_\_  
(Last) ( First )

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Relationship \_\_\_\_\_ How long \_\_\_\_\_

Occupation \_\_\_\_\_

**References: (Previous/Current Adjacent Neighbor)**

Name: \_\_\_\_\_  
(Last) ( First )

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Relationship \_\_\_\_\_ How long \_\_\_\_\_

Occupation \_\_\_\_\_

**Emergency Contact:**

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Emergency Contact:**

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Registration: (Name(s) of those who will be living in the Cove)**

Name of Each Adult	Name of Each Minor	Age	Grade
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been convicted of, pled guilty or no contest to any offense other than a minor traffic violation?

Yes  No  If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Has/have your child/ren ever been in trouble with the law? Yes  No  If yes, explain:

\_\_\_\_\_  
\_\_\_\_\_

Pets: (be specific) \_\_\_\_\_

**Note:** Owners of the following breeds of dogs: Chow, Doberman, German Sheppard, Pit Bull, Rottweiler or Wolf mix – must maintain liability insurance specifically covering related claims.

1. Approval by the Executive Committee is based on your history with Cypress Cove and the results of a criminal and credit background check.
2. Cypress Cove Nudist Resort is a private organization. We reserve the right to reject any applicant who we feel will not be compatible with the community.
3. Sun Cove of Kissimmee (Cypress Cove) does not discriminate on the basis of Race, Age, Color, Religion, Sex, or National Origin.

Enclosed is a non-refundable fee of \$200.00 (Single) / \$350.00 (Couple). If approved this application will expire (3) years from date of approval.

**Office Use Only:**

Approved       Disapproved       By: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_