

(All requests for pool/gate cards must be made by submitting this form)

(Members name)

(Email)

☐ I am applying for the replacement of a lost card (\$25.00 replacement fee)

(Date)

☐ I have included the required \$40.00 deposit

(Date)

Return to:  
Cape Conroe c/o IMC  
3500 W Davis St Ste 190  
Conroe, Texas 77304  
Susan Shely  
Community Association Manager  
sshely@imcmanagement.net