

Summerfield INFORMATION REQUEST

NEIGHBORHOOD ASSOCIATION

DATE _____

LAST NAME

FIRST NAME

MAIDEN

I am owner of record on the deed. I am not the property owner of record.

NAME OF CO-OWNER, SPOUSE _____

DATE / YEAR OF PURCHASE _____

ADDRESS _____ PHASE _____

CITY _____ STATE _____ ZIPCODE _____

BIRTHDAY _____ EMAIL _____

CHILDREN _____ AGE _____ PETS / BREED / NAME / AGE _____

I would be interested in leading, supporting or assisting with a group involving:

- | | | |
|---|--------------------------------------|--|
| <input type="radio"/> Kids activities | <input type="radio"/> Garage Sales | <input type="radio"/> Crime Watch / Prevention |
| <input type="radio"/> Gardening | <input type="radio"/> Pets & Animals | <input type="radio"/> Fitness / Exercise |
| <input type="radio"/> Welcome Committee | <input type="radio"/> Healthcare | <input type="radio"/> Other |

I would like to:

- Join the homeowners association
 - Host an association board meeting in my home
 - Serve on the association board of directors or hold office
 - Other
-
- I have paid** my \$100 annual association dues for this year.
 - I have not paid** my \$100 annual association dues for this year.

I moved to Summerfield because:

Comments / Questions / Concerns:
