



Member# \_\_\_\_\_

### NEW RESIDENT INFORMATION

Please complete and return this form to the **Recreation District Administration Office**.

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

Lot # \_\_\_\_\_ Purchased from \_\_\_\_\_ or NEW House \_\_\_\_\_

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

Actual Closing Date: \_\_\_\_\_

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

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Billing Preference: (\_\_\_) Email Only (\_\_\_) Printed Only (\_\_\_) Both Email and Printed

**If you have an address change, please notify the Administration Office.**

Please check one: Seasonal (\_\_\_) Permanent (\_\_\_) Rental Home (\_\_\_)

If seasonal, please indicate approximate dates of occupancy: \_\_\_\_\_

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

If you will be a permanent resident, what was your State of origination? \_\_\_\_\_

**We have an email communicating system in place whereby we email the owners all of the latest news. Please check one of the boxes below regarding your email address:**

- You may send me email.
- You may include my telephone and email address as part of the Resident Phone and Email Listing which will also be posted on the Herons Glen Recreation District web site.
- Please **DO NOT** include my email address on the Resident Phone and Email Listing.
- Please **DO NOT** include my telephone number on the Resident Phone and Email Listing

#### PERSON(S) YOU WOULD LIKE US TO CONTACT IN CASE OF AN EMERGENCY:

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

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

Signature \_\_\_\_\_

Date \_\_\_\_\_

cc: Accounting, Activities, HOA