

**Cedar Ridge Homeowners Association, Inc.**  
**Association Owner Information & Associate Member Directory**

To: Cedar Ridge Homeowners

From: Tom Carozza, Property Manager

We need the following information to update our Woodbridge records and provide homeowners with an updated Associate Member Directory. **Please fill out, print clearly and return with your next payment.**

**Woodbridge Group Records**  
(Required information)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

Alternate Address: \_\_\_\_\_  
Alternate Phone: \_\_\_\_\_

**Emergency Contact Information**

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Phone: \_\_\_\_\_

Note: The above information is provided for the expressed use of Woodbridge Group only.

-----**Cedar Ridge Members Directory**-----  
(What will be published)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone: (optional) \_\_\_\_\_  
Occupation: (optional) \_\_\_\_\_  
Work Phone: (optional) \_\_\_\_\_  
E-Mail: (optional) \_\_\_\_\_

Note: All Members names and addresses will appear in directory. This member directory is confidential and cannot be reproduced or distributed for business or solicitation purposes.

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_