

**Hamilton Place Association, Inc.**  
**Owner Information Update for Member Directory**

To: Hamilton Place Homeowners

From: Kristen Werner, Property Manager

We need the following information to update our Woodbridge records. **Please fill out, PRINT CLEARLY and return A.S.A.P.**

**Woodbridge Group Records**  
(Required information)

Name (Owner): \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Name (Tenant if any): \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_

**Secondary Residence**

Alternate Address: \_\_\_\_\_  
Alternate Phone: \_\_\_\_\_  
Dates: (i.e. Winter Oct.- May) \_\_\_\_\_

**Emergency Contact Information**

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

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

-----**Hamilton Place Members Directory**-----  
(What may be published)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone: (optional) \_\_\_\_\_  
Mobile Phone: (optional) \_\_\_\_\_  
Alt. Phone: (optional) \_\_\_\_\_  
E-mail: (optional) \_\_\_\_\_

Note: All Members names and addresses will appear in directory. Additional information must be authorized. Your member directory is confidential; portions are subject to privacy laws and cannot be reproduced or distributed for business or solicitation purposes,

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