

# Midway Lifescape Villas Homeowners Association, Inc.

---

## RESIDENT CONTACT INFORMATION

All information is intended for confidential and private use to contact residents for Association business only by the Board of Directors and Management.

Please submit this completed form to the Association via fax at 214-778-0550, email at [planoadmin@cmamanagement.com](mailto:planoadmin@cmamanagement.com) or mail to 1800 Preston Park Blvd, Suite 101, Plano, TX 75093.

Please print the following information:

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

NAME OF OTHER PERSONS LIVING IN UNIT: \_\_\_\_\_

UNIT # \_\_\_\_\_ HOME PHONE #: \_\_\_\_\_

MOBILE PHONE #: \_\_\_\_\_ WORK PHONE #(S): \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

PREFERRED CONTACT METHOD: \_\_\_\_\_

## RULES AND REGULATIONS

I acknowledge that I have received the Midway Lifescape Villas Homeowners Association Rules and Regulations. Signature: \_\_\_\_\_

## VEHICLE INFORMATION

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YEAR: \_\_\_\_\_ LICENSE #: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YEAR: \_\_\_\_\_ LICENSE #: \_\_\_\_\_

## PET INFORMATION

CIRCLE ONE: DOG CAT

BREED: \_\_\_\_\_ COLOR: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ DATE OF LAST VACCINATIONS: \_\_\_\_\_

CIRCLE ONE: DOG CAT

BREED: \_\_\_\_\_ COLOR: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ DATE OF LAST VACCINATIONS: \_\_\_\_\_