



Bonaventure
TOWN CENTER CLUB

Information Sheet

Member # _____

Address _____ **Date:** _____

Owner(s), i.e. persons whose names are on the deed. Official notices will be sent only to the first name provided.

1. Name _____

Address _____

street or PO box, city, state, zip code --if other than above

(_____) _____

phone

e-mail address

2. Name _____

Address _____

street or PO box, city, state, zip code --if other than above

(_____) _____

phone

e-mail address

3. Name _____

Address _____

street or PO box, city, state, zip code --if other than above

(_____) _____

phone

e-mail address

4. Name _____

Address _____

street or PO box, city, state, zip code --if other than above

(_____) _____

phone

e-mail address

I attest that these are the owner(s) of the unit:

Signature _____

Date _____



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Occupants of the Home

Persons residing in the unit (other than the unit owners):

1.Name _____
Address _____
() _____
Phone _____ e-mail address _____

2.Name _____
Address _____
() _____
Phone _____ e-mail address _____

3.Name _____
Address _____
() _____
Phone _____ e-mail address _____

4.Name _____
Address _____
() _____
Phone _____ e-mail address _____

5.Name _____
Address _____
() _____
Phone _____ e-mail address _____

6.Name _____
Address _____
() _____
Phone _____ e-mail address _____



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RENTAL/LEASE AGREEMENTS

Note: The information on this sheet must be completed in its entirety.

Is your Home rented? No ___ Yes ___ If yes,
from: _____ to: _____

1.Name _____ Phone _____
e-mail: _____

2.Name _____ Phone _____
e-mail: _____

3.Name _____ Phone _____
e-mail: _____

4.Name _____ Phone _____
e-mail: _____

Note: for your lessee to be renewed by BTCC a lease renewal must be submitted to the Town Center 30 days in advance of the lease's expiration.

I attest that if/when I lease my unit, or renew the lease that I will provide a copy of the lease to BTCC and that failure to provide lease/renewal will necessitate the Clubs actions in withholding tenant's use of the Bonaventure Town Center Club.

Signature _____

Date _____