



**Annual Member Information**

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

Spouse: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_

Applicant: \_\_\_\_\_ Daytime Phone Spouse: \_\_\_\_\_

Applicant: \_\_\_\_\_ Mobile Phone Spouse: \_\_\_\_\_

Children Living at Home

Name	Date of Birth

*The term of this membership shall be for one year, and the cost is \$395.00 for the 2008 season. Memberships are effective upon the payment in full of the fee.*

*Please make checks to: Woods of Parkview Homeowners Association.*  
*Mail to: Barb Benners 23 Planters Dr. Lilburn, GA 30047*

*My household agrees to abide by The Woods of Parkview Homeowners Association Swimming Pool Rules and Tennis Rules; the complete rules are posted in the bathhouse and on the website, [www.wopha.com](http://www.wopha.com).*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Member making referral if Applicable: \_\_\_\_\_