

# DALLAS MEADOWS COMMUNITY ASSOCIATION

P.O. Box 853  
Ridgway CO. 81432

RE: Dallas Meadows Community Association (DMCA)  
Members Contact Information

In an effort to keep and maintain accurate contact information for each DMCA Member, the Board of Directors respectfully requests that you provide the following:

Please Print:

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Is this your main residence?       Yes                       No

Second Residence:

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

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

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

Does the Dallas Meadows Community Association Board of Directors have your permission to make available or provide your personal contact information when requested by other DMCA members for the purposes of contacting you?

Yes                       No

NOTE: Personal Contact information will not be provided to any other individual, business, or agency unless first authorized by you.

\_\_\_\_\_  
Signature

(Please return with ballot at meeting)