WHITEHAWK NEIGHBORHOOD COMMITTEE
MEMBERSHIP REGISTRATION FORM

Name of Homeowner(s): _____

Address: _____

Telephone: _____

E-mail: _____

If desired, please list all members of household (i.e. additional adults or children), other than homeowners(s):

Name	**Age**	**Name**	**Age**

If desired, please identify pets in household:

Cat/Dog/Other	**Breed/Color**	**Name**	**Cat/Dog/Other**	**Breed/Color**	**Name**

Please submit the completed membership form at submit to the WHNC at the address listed below.
Your Membership will not be considered active until we receive your $10.00 Membership dues.
Membership dues are valid from the day received until June 30, 2011.

Whitehawk Neighborhood Committee
19602 Andresen St
Omaha, NE 68135
www.whitehawkneighbor.com

I attest, by my signature below, that I have read, and hereby agree to comply with the bylaws established by the Whitehawk Neighborhood Committee. A copy of the WHNC Bylaws is available on our website.

Please check one:

☐ I would like my information above listed in our public Whitehawk Neighbor Directory.

☐ Please keep my information private and do not list in the Whitehawk Neighbor Directory.

_____ _____
Homeowners Signature **Date**