



Westminster Community Association

Have you read and understand the Westminster Association Rules & Regulations documents? Yes _____ No _____

Date: _____

Owner Information

Owner name: _____
First *Last*

Spouse/ Co- owner _____

Address: _____
Property Address

Cell: _____ 2nd Cell: _____

Email: _____ 2nd Email: _____

**Do you have pets? YES NO If yes, how many? _____

Only 2 pets permitted per household in Westminster Community. Pets should also be up to date with their shots. You are acknowledging that your pet(s) feces will always be picked up immediately and your pet(s) must always be on a leash. Please be aware and courteous of your neighbor's lawn. Please sign that you read and understand these rules.

Signature: _____

In case of an emergency, please notify:

Name: _____ Number: _____

This residence will be a:

Permanent Residence Part Time Residence Part Time Residence/ Rental

**If you selected part time, please indicate your preferred mailing address below.

(This is where you would like your Association related communications sent.)

Alternate address: _____

The Association may publish a directory containing your name and unit address; In accordance with Florida statutes please consent below to include any of the following additional information in the directory. The information above can also be used to send important information, letters and notices by Committee members, Board of Directors or the office. Please be advised that your Email will be included into the Westminster Newsletter "The Crier" for important news and information regarding the Community.

It is the responsibility of the owner/ resident to keep the above information current.

Please check to consent

Your phone number(s) Email Alternate address