



## Neighborhood Association Registration Form

By registering with the City of Garland, your association will receive valuable information from various city departments, such as the Neighborhood Vitality Office, the City Manager's Office, and the Planning Department. If your association would prefer someone other than the president to receive this information, please indicate the person on this form. **PLEASE PRINT ALL INFORMATION.**

**Date Information Provided:** \_\_\_\_\_

**Association Name:** \_\_\_\_\_

### **Neighborhood Boundaries:**

North: \_\_\_\_\_ South: \_\_\_\_\_

East: \_\_\_\_\_ West: \_\_\_\_\_

If your neighborhood is not rectangular, please describe the bounding streets (or creeks, parks, railroads, etc) in clockwise order starting at the north, or trace the boundaries on a copy of a local street map and submit it with this form.

### **Association Mailing Address**

Street/P.O.B.: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

### **Names & Addresses of Four Officers or Directors of the Association:**

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

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

Daytime #: \_\_\_\_\_ Evening #: \_\_\_\_\_

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

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

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

Daytime #: \_\_\_\_\_ Evening #: \_\_\_\_\_

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

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

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

Daytime #: \_\_\_\_\_ Evening #: \_\_\_\_\_

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

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

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

Daytime #: \_\_\_\_\_ Evening #: \_\_\_\_\_

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

**Neighborhood Information:**

- Who is eligible to be a member of your association? (For example: residents, businesses, etc.)

\_\_\_\_\_

- How many homes are located in your association's boundaries?

\_\_\_\_\_

- How many people currently belong to your association?

\_\_\_\_\_

- When was the association founded?

\_\_\_\_\_

- When are officers elected? \_\_\_\_\_ Length of Term: \_\_\_\_\_

- Regular Meeting (Time/Day/Location):

\_\_\_\_\_

**Newsletter:**

- If the association has a newsletter, when is it published (monthly, quarterly, other)?

\_\_\_\_\_

- Who is the primary contact person for the newsletter? \_\_\_\_\_

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

- Address: \_\_\_\_\_ Zip: \_\_\_\_\_

- Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_
- When is the publication deadline? \_\_\_\_\_

**Additional Information or Comments:**

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\* As a public service, the City of Garland maintains a listing on the Internet of associations and presidents (<http://www.ci.garland.tx.us>). Please indicate what information you would like listed on the website or if your association has a website and you want the link to be accessible from the neighborhood/homeowner association page. Please check one of the following:

- List the president's name and e-mail address, the association address, and the contact number.
- List the president's name, e-mail address and the association address only.
- List the president's name and the association address only.
- Please do not include any of our information on the website.

**Mail completed forms to Felisa Conner, Office of Neighborhood Vitality, P. O. Box 469002, Garland, TX 75046-9002 or fax to 972-205-2474. Please call 972-205-3864 or e-mail: [fconner@ci.garland.tx.us](mailto:fconner@ci.garland.tx.us) with questions or comments.**