**BAYSIDE HOMEOWNERS ASSOCIATION (BHOA)** ANNUAL Dues Year \_\_\_\_\_\_\_ **$15.00**/Household

**MEMBERSHIP FORM**

**\_\_\_\_\_\_\_\_ NEW APPLICATION \_\_\_\_\_\_\_ RENEWAL \_\_\_\_\_\_\_\_ NO LONGER LIVE IN POT-NETS BAYSIDE**

**SECTION A: (Please Print Clearly)**

**Primary Resident/Homeowners’ Name(s):**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BAYSIDE 5-Digit Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAILING Address for Correspondence:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ I don’t have email.**

**SECTION B: *Please complete this form and mail it with your $15 dues to:***

BHOA Membership, 34749 Turnbuckle Street, Long Neck, DE, 19966

**\_\_\_\_\_ $15 Check payable to BHOA \_\_\_\_\_ $15 Cash**

**PLEASE CHECK ONE BOX BELOW**

***PLEASE NOTE: The BHOA Board of Directors is LEGALLY PROHIBITED from representing any member of the BHOA without written permission, except in the matter of Right of First Offer. This form constitutes “written permission” once signed and submitted to the BHOA.***

***I WANT*** to become a member of the Bayside Homeowners Association (BHOA), and **I give the BHOA Board of Directors permission to represent me**, and any other person(s) currently on the lease at the above Bayside address, in all matters related to Rent Adjustment/Reduction, and any other ***community*** matter related to my manufactured home in Pot-Nets Bayside. **I understand I have the right to refuse representation, in writing to the BHOA Board, for any reason, at any time.**

***I WANT*** to become a member of the BHOA, **BUT** ***I DO NOT* give the BHOA Board of Directors permission to represent me**, or any other person(s) currently on the lease at the above Bayside address. **I understand I will not be represented by the BHOA Board in any matter related to Rent Adjustment/Reduction, or any other community matter, unless I change this option, in writing to the BHOA Board of Directors.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOMEOWNER SIGNATURE PRINT NAME**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOMEOWNER SIGNATURE PRINT NAME**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE**