

Whispering Hills Property Owners Association
Member Information

Name(s): _____

Current Address: _____

Whispering Hills Lot No./Address: _____

Telephone(s): Cell _____ Home _____

E-mail(s): _____

I have received and have access to the Deed Restrictions and the Bylaws for the Whispering Hills (WH) subdivision. These and other Property Owners Association (POA) documents are available on the website at www.whisperinghillspoa.org.

I'm requesting membership in the POA and agree to pay the annual membership fee of \$20.00. I understand my membership fee must be renewed each year. I will be billed for the annual membership fee in compliance with the POA Bylaws.

Membership in the POA grants me certain benefits, among them is the right to attend and vote on WHPOA matters and eligibility to serve as a Board member and vote in WHPOA elections. I understand I will be eligible for other member benefits offered from time to time by the WHPOA and I will receive a discount on most services charged by the POA.

My membership remains in effect until such time as I submit a written resignation or I fail to pay the annual membership fee when due.

Signature(s): _____

Date: _____

Notice: The official legal name of the Whispering Hills subdivision POA is Whispering Hills of Comal County Property Owners Association, Inc. Whispering Hills POA or WHPOA is used interchangeably with our legal name.