



RENTERS REGISTRATION FORM (Single Family Homes)

FOR _____ DATE _____
Name of Association

ADDRESS OF RENTAL PROPERTY _____

UNIT OWNERS NAME _____ Phone _____

LEESEE'S NAME (S) _____

ADDRESS _____ PHONE _____
LOCAL PHONE _____

TERM OF LEASE FROM _____ TO _____

PERSONAL REFERENCE
NAME _____ PHONE _____

MAKE AND MODEL OF VEHICLE _____

YEAR _____ COLOR _____ LICENSE PLATE _____

IN CASE OF EMERGENCY CONTACT

NAME _____ RELATION _____

ADDRESS _____ PHONE _____

SIGNATURE(S) OF LESSEE _____ DATE _____

SIGNATURE OF LESSOR _____ DATE _____

Return this form to: Wyndemere Homeowners Association, 98 Wyndemere Way, Naples, FL 34105
Email: assistantcam@wyndemere.com Fax: 239-263-1543 Phone: 239-263-0761

Privacy Supervisor
Neighborhood Association President