

Century Farms Neighborhood Association Directory

Directory Form 2006-2007

ATTENTION HOMEOWNERS: General information will be listed when this form is not submitted, name and address of homeowner(s). Each homeowner will be mailed a directory upon completion. **Children's names will only be added upon the consent from the parent!**

Example of Directory Information Listed:

Resident, Tom and Terri 355-1234
 Resident, Mary (Grandmother)
 1234 Main Street
tomresident@yahoo.com
terriresident@yahoo.com
 Trevor (9/89) - Snowplows/shovels, Mows Lawn
 Theresa (7/90) - Babysits, Walks Dogs, Feeds Fish

DO NOT PUBLISH MY INFORMATION IN THE DIRECTORY.

SignaturePrint NameAddress/Phone

Block Captains will maintain their block's phone tree personalized information to include work phone numbers and cell phone numbers. These numbers will not be placed in the phone directory.

| | | |
|------------------|--------------------------|--------------------------|
| Last Name | Male's First Name | Home Phone Number |
|------------------|--------------------------|--------------------------|

| | | |
|------------------|----------------------------|---|
| Last Name | Female's First Name | Teen's Phone Number (if provided will be listed) |
|------------------|----------------------------|---|

| | | |
|----------------------|--------------------------|--------------------------|
| House Address | His Email Address | Her Email Address |
|----------------------|--------------------------|--------------------------|

| | | | |
|------------------|---------------------------------|------------------------|----------------------------------|
| Last Name | First Child's First Name | Month/Year Born | Types of Service Provided |
|------------------|---------------------------------|------------------------|----------------------------------|

| | | | |
|------------------|----------------------------------|------------------------|----------------------------------|
| Last Name | Second Child's First Name | Month/Year Born | Types of Service Provided |
|------------------|----------------------------------|------------------------|----------------------------------|

| | | | |
|------------------|---------------------------------|------------------------|----------------------------------|
| Last Name | Third Child's First Name | Month/Year Born | Types of Service Provided |
|------------------|---------------------------------|------------------------|----------------------------------|

| | | | |
|------------------|----------------------------------|------------------------|----------------------------------|
| Last Name | Fourth Child's First Name | Month/Year Born | Types of Service Provided |
|------------------|----------------------------------|------------------------|----------------------------------|

| | | | |
|-----------|-----------------------------|-----------------------|--|
| Last Name | Other Resident's First Name | Relationship to Owner | <input type="checkbox"/> To be listed in directory |
|-----------|-----------------------------|-----------------------|--|

| | | | |
|-----------|-----------------------------|-----------------------|--|
| Last Name | Other Resident's First Name | Relationship to Owner | <input type="checkbox"/> To be listed in directory |
|-----------|-----------------------------|-----------------------|--|

| | | | |
|-----------------|-----------------------|-----------------|-----------------------|
| His Work Number | His Cell Phone Number | Her Work Number | Her Cell Phone Number |
|-----------------|-----------------------|-----------------|-----------------------|

I authorize Century Farms Neighborhood Association to print the above information in a Neighborhood Directory.
I understand that any work phone numbers and cell phone numbers are being obtained specifically for the purpose of a Neighborhood Watch Phone Tree and will not be printed in the neighborhood directory and will be made available only to the Neighborhood Watch Block Captains.
I understand that the email addresses I provided will be printed in the directory & will hold harmless CFNA for any emails that may be sent.
I understand that by checking the appropriate box below represents my consent for my children's information to be posted in the directory.

Submission of this form authorizes the board to list the information as directed above.

In order to provide children information please check the box below.

I authorize the posting of my children's information **I do not authorize the posting of my children's information**

I am interested in volunteering for the following committees: _____
 Please print your name and interested committee.