



ADDRESS FORM

If you wish to remain unlisted in the roster please sign and return the attached "OPT OUT" form. If you prefer to remain unlisted in the roster, we still ask that you return this form to the office for our records.

Homeowner Name(s): _____

Morningside Address: _____

Morningside Phone #: _____

Email Address (es): _____

Address for Statements

Roster

Address _____

City _____ State _____ Zip _____

Summer Address (May – September)

Roster

Address _____

City _____ State _____ Zip _____

Daytime Phone # _____ Evening Phone # _____

Winter Address (October – April)

Roster

Address _____

City _____ State _____ Zip _____

Daytime Phone # _____ Evening Phone # _____

M Summer/Winter addresses will be used for General Mailings, such as Newsletters, correspondence from the Board, etc.

M Please indicate if you would like an alternate address (other than your Morningside address) to appear in the roster by checking only **one** box above.

Signature: _____ Date: _____



**MEMBERSHIP ROSTER
OPT OUT FORM**

I, _____, am the current owner of real property within the Morningside Community Association (“Association”), with the common street address of _____, and have full authority to make legal decisions affecting my residence.

Pursuant to *Civil Code* section 1365.2, and any successor statute, I hereby exercise my rights to opt out of sharing my name, property address, mailing address or any of my personal information with any other member of the Association. I prefer to be contacted by an alternative process as described in *Corporations Code* section 8330 (c).

This opt out shall remain in effect until changed by me or my legal representative.

SIGNATURE OF MEMBER

DATE