



LOT # \_\_\_\_\_

Street: \_\_\_\_\_

The following information is requested for use by:  
Paradise Island Co-Op, Inc and/or Paradise Island Homeowners Association, Inc.

As a resident in Paradise Island I give the associations above the authority to use my contact information as indicated:

I (We) are:  Shareholder(s)

Leaseholder(s)

PLEASE PRINT ALL CONTACT INFORMATION

Resident Name(s): \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email Address(es): \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

I (we) authorize use in the following systems and/or using the following process for information updates & notifications:

Paradise Island Management Systems

One Call    Text Message    Phone    E-Mail    Text & E-Mail    Phone & Email

Co-Op Shareholder Communication

HOA Communication

Community Directory/ Phone Book

How would you like your name(s) listed in the directory/phone book?

\_\_\_\_\_  
PLEASE PRINT

Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

Office Use Only:

**Shareholders Only:** Copy to Co-Op Secretary Mail Box

**Leaseholders Only:** Copy to HOA Mailbox

**For Both Shareholders & Leaseholders :**

Update Phone Directory File

Update One Call

Copy to Phone Directory Binder

Update Mgmt Systems