

Directory Information/Release Form

Name: _____

Village Street Address: _____

Unit/Lot #: _____

If you receive mail in Show Low while you are enjoying your time at the Village, please note it here:

Home Address City/State: _____

Home Phone: _____

Cell Phone(s): _____

Email Address: _____

By signing below, I/we give my/our permission for the above information to be published in a directory to be distributed to all residents of White Mountain Vacation Village.

Signature

Signature