

Neighborhood Based Group Registration Form

Register your group with the City of Garland, to receive information from various city departments, such as grant information, training and event updates. If your association would prefer someone other than the president to receive this information, please indicate the person on this form. PLEASE PRINT ALL INFORMATION.

Date Information P	rovided:		
Association Name:			
Neighborhood Bou	ındaries:		
North:		South:	
East:		West:	
	ler starting at the north,		ounding streets (or creeks, parks, railroads, laries on a copy of a local street map and
Association Mailing	g Address		
Street/P.O.B.:			
Zip Code:	Phone:		Fax:
Web Address:			
E-mail:			
Names & Addresse	es of Four Officers or I	Directors of the A	ssociation
Name:			Title:
Address:			Zip:
Daytime #:		Evening #:	
F ₋ Mail·			

Name:		. Title:
Address:		Zip:
Daytime #:	Evening #:	
E-Mail:		
Name:		. Title:
Address:		Zip:
Daytime #:	Evening #:	
E-Mail:		
Name:		. Title:
Address:		Zip:
Daytime #:	Evening #:	
E-Mail:		
Neighborhood Information:		
Who is eligible to be a member of	•	example: residents, businesses, etc.)
How many homes are located in		daries?
How many people currently belo	ng to your association?_	
When was the association found	ed?	
When are officers elected?		Length of Term:
Regular Meeting (Time/Day/Location)	n):	

Newsletter: If the association has a newsletter, when is it published (monthly, quarterly, other)? Who is the primary contact person for the newsletter? Name: _____ Address: Zip: _____ E-mail: _____ When is the publication deadline?

Additional Information or Comments:

* As a public service, the City of Garland maintains a listing on the Internet of associations and presidents (http://www.ci.garland.tx.us). Please indicate what information you would like listed on the website or if your association has a website and you want the link to be accessible from the neighborhood/homeowner association page. Please check one of the following:

List the president's name and e-mail address, the association address, and the contact number.
List the president's name, e-mail address and the association address only.
List the president's name and the association address only.
Please do not include any of our information on the website.

Mail completed forms to Felisa Conner, Office of Neighborhood Vitality, POB 469002, Garland, TX 75046-9002 or fax to 972-205-2474. Please call 972-205-3864 or e-mail fconner@ci.garland.tx.us with questions or comments.