



AMERICANA GARDENS HOMEOWNERS ASSOCIATION

TENANT REGISTRATION FORM

HOMEOWNER CONTACT INFORMATION

Name:

Unit Number:

Email:

TENANT CONTACT INFORMATION (LEASING UNIT)

Tenant Name:

Tenant Name:

Contact Number:

2nd Number:

Email:

Email:

Lease Start Date:

Lease End Date:

Vehicle Make:

Vehicle Model:

Vehicle License Plate:

Vehicle Make:

Vehicle Model:

Vehicle License Plate:

I, _____ the owner of the above listed unit hereby guarantee that I have provided with my tenant(s) with the governing documents of the HOA, including the Rule & Regulations.

Please return this form to Rhonda Drews at: rdrews@brpcam.com