



Information Publication  
Release Authorization

Lot#: \_\_\_\_\_

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

Resident 1 \_\_\_\_\_

\_\_\_\_\_ Telephone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ Email address \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ Resident 1 Birthday (month/day only) \_\_\_\_/\_\_\_\_  
Month Day

Resident 2 \_\_\_\_\_

\_\_\_\_\_ Telephone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ Email address \_\_\_\_\_ @ \_\_\_\_\_ +

\_\_\_\_\_ Resident Birthday (month/day only) \_\_\_\_/\_\_\_\_  
Month Day

\_\_\_\_\_ Anniversary Date (month / day only) \_\_\_\_/\_\_\_\_  
Month Day

\_\_\_\_\_ May we email the news letter to you? ( Yes / No )

I (We) hereby **CONSENT** to allow the Meadows of Crystal Lake HOA to publish the following information in our Printed Directory - On-Line Directory - Monthly News Letter.

**Please Supply Info to be published, and initial those that apply**

Phone Directory Display Style

- \_\_\_\_\_ One line      John & Jane Doe phone
- \_\_\_\_\_ Two lines    John Doe phone 1
- Jane Doe phone 2

Resident 1 Signature \_\_\_\_\_

Resident 2o Signature \_\_\_\_\_

2300 SW 17<sup>th</sup> Circle  
Deerfield Beach, Florida 33442  
(954) 426-3503 fax: 954-426-3554

Email: [Themeadows2300@gmail.com](mailto:Themeadows2300@gmail.com) Website: [themeadowsofcrystallake.com](http://themeadowsofcrystallake.com)