



RESIDENTS
ASSOCIATION

Members Information Form

AuburnBayRA.ca

Full Name (Voting Member): _____ Pronouns (optional): _____

Address: _____

E-mail Address: _____

Home Phone #: _____ Cell Phone #: _____

To obtain permanent membership cards, you will need to show us a copy of your Certificate of Title. All members 16+ must provide Government issued photo ID WITH the Auburn Bay Address on it.

Full Name: _____ Pronouns (optional): _____

Birthdate: _____ Relationship to Member: _____
(If under 18 years of age)

Full Name: _____ Pronouns (optional): _____

Birthdate: _____ Relationship to Member: _____
(If under 18 years of age)

Full Name: _____ Pronouns (optional): _____

Birthdate: _____ Relationship to Member: _____
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Full Name: _____ Pronouns (optional): _____

Birthdate: _____ Relationship to Member: _____
(If under 18 years of age)

Full Name: _____ Pronouns (optional): _____

Birthdate: _____ Relationship to Member: _____
(If under 18 years of age)

Homeowner Signature: _____ Date: _____

Please note that the articles of Association require that all members notify the administration of Auburn House of any address. Please also be aware that by providing your email address, you are consenting to receiving important information regarding safety, procedural and policy changes, etc. You will have the ability unsubscribe.