

*Let's enjoy our
community by
protecting our
properties.*

Midlane Club Condominium Association

RESIDENT REGISTRATION FORM

Resident Contact and Emergency Information Form – REIF

Unit # _____ - Date _____

RESIDENT NAME(S) _____

MAILING ADDRESS _____

E-MAIL ADDRESS _____

HOME# _____ WORK# _____ MOBILE# _____

EMERGENCY CONTACT

Name _____ Phone _____

VEHICLES

Make/Model _____ Color _____ Year _____ Licence Plate _____

Make/Model _____ Color _____ Year _____ Licence Plate _____

Make/Model _____ Color _____ Year _____ Licence Plate _____

PETS

Dog/Breed _____ Cat/Breed _____ Name _____ Weight _____

Dog/Breed _____ Cat/Breed _____ Name _____ Weight _____

If the owner(s) are not residents in the unit indicated above (off-site owner) please complete this section:

OWNER NAME(S) _____

MAILING ADDRESS _____

E-MAIL ADDRESS _____

HOME# _____ WORK# _____ MOBILE# _____

The Association respects the right to privacy and this information will only be used for the purpose of providing all members with more efficient service. We appreciate your cooperation in completing this form and returning it as soon as possible.

- Mail to: MCRVCA c/o Marianna Zeidler, P. O. Box 8605, Gurnee, IL 60031
- E-mail to: MCRVCA.Board@gmail.com.