

## Owner Registration

Unit #: \_\_\_\_\_

	☐ Primary Residence	$\square$ 2 <sup>nd</sup> Home $\square$ Rental	
Owners:			
List only names that are <u>on the deed</u> for the unit. I	f unit is owned by a Trust or LLC, list ar	ny authorized members.	
First Name:	Last Name:		
Cell #:	Other Contact #:		
Email:	_		
Check if you do NOT wish to receive:	☐ Emergency SMS Alerts	☐ Email Notifications/Eblasts	
First Name:	Last Name:		
Cell #:	Other Contact #:		
Email:	_	_	
Check if you do NOT wish to receive:	☐ Emergency SMS Alerts	☐ Email Notifications/Eblasts	
First Name:	Last Name:		
Cell #:	Other Contact #:		
Email:			
Check if you do NOT wish to receive:	☐ Emergency SMS Alerts	☐ Email Notifications/Eblasts	
Residents:			
List any additional residents of your unit, including children.			
First Name:	Last Name:		
Cell #:	Relationship:		
Email:			
Check if you do NOT wish to receive:	☐ Emergency SMS Alerts	☐ Email Notifications/Ehlasts	

First Name:	Last Name:		
Cell #:	Relationship:		
Email:		_!	
Check if you do NOT wish to receive:	☐ Emergency SMS Alerts	☐ Email Notifications/Eblasts	
First Name:	Last Name:		
Cell #:	Relationship:		
Email:	_	_!	
Check if you do NOT wish to receive:	☐ Emergency SMS Alerts	☐ Email Notifications/Eblasts	
First Name:	Last Name:		
Cell #:	Relationship:		
Email:		_	
Check if you do NOT wish to receive:	☐ Emergency SMS Alerts	☐ Email Notifications/Eblasts	
Additional Information:			
Primary Contact:	Phone #:		
Intercom Phone #:			
	this unit requires evacuation assistand ails below. Be sure to include resident's name.	ce.	
By signing this registration, I acknowledge on behalf of all occupants in the unit that we must adhere to Keola La'i building documents and we have a copy of the House Rules & Regulations. In addition, we acknowledge it our responsibility to adhere to all Keola La'i building policies and any updated version(s). Moreover, it is our responsibility to update the Management Office immediately of any changes within the registration.			
Name:Sign	ature:	Date:	