

## Neighborhood Association Registration Form

**Neighborhood Association name:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Please list below the executive officers or other representatives we should contact with information:**

Name	Address	Phone # and email
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Neighborhood boundary description:**

**North:** \_\_\_\_\_

**East:** \_\_\_\_\_

**South:** \_\_\_\_\_

**West:** \_\_\_\_\_

**Please attach a copy of the association by-laws and any additional information that the association has used in organizing.**

Please return to HAND, P.O. Box 100, Bloomington, IN 47402