

**Four Seasons at Forest Meadows Homeowners Association
Occupant Registration and Age Restriction Verification Form
2025 Annual Census Survey Requirements**

Address: _____

Home Phone #: _____ Type of Property: Owned Rental

Resident No. 1

Name: _____

Email Address: _____

Cell Phone: #: _____ Birthdate: _____

Resident No. 2

Name: _____

Email Address: _____

Cell Phone: #: _____ Birthdate: _____

Additional Occupants

Name: _____ Birthdate: _____

Name: _____ Birthdate: _____

Clubhouse Key Card #s: _____

Do you want your information published in the HOA Directory, which provides only contact information for the exclusive use of FSFM residents? Yes No

Please attach proof of age (Copies of Birth Certificate, Driver's License or Passport) and email to HOA@forestmeadowshoa.comcastbiz.net