WINTER HAVE OAKS HOMEOWNERS ASSOCIATION
5235 CREPE MYRTLE LANE, WINTER HAVEN, FL 33880
www.winterhavenoakshoa.org

Email address: office@winterhavenoakshoa.org

MEMBERSHIP APPLICATION

Instructions:
Complete this form and send the completed document to the Treasurer with a check payable to **Winter Haven Oaks** Homeowners Association (WHOHOA) for the appropriate amount noted below.

Member Name (first, last)	
Member Name (first, last)	
Member Name (first, last)	
Member Name (first, last)	
Lot Number:	WHO Address:

Winter Haven Oaks HOA Dues Structure (per lot)

2023 Membership $20.00 _____

2024 Membership $25.00 _____

Membership fees must be paid 10 days prior to elections to vote in elections.

Release From Liability			
The signers below acknowledge Winter Haven Oaks Homeowners Association, Inc. ("Winter Haven Oaks") and affirm their intention to become members. The signers below certify their agreement to accept full responsibility for their safety and welfare while attending any Winter Haven Oaks activities during the membership period covered by their membership payments. The signers below further agree that the Winter Haven Oaks Board Members shall not be held liable for any claims relating to the Board's management of the Winter Haven Oaks Homeowners Association or its activities and shall not be held liable for any injuries or monetary claims arising from any Winter Haven Oaks activity.			
Signature:	Date:	Signature:	Date:
Signature:	Date:	Signature:	Date:

WHOHOA Use Only

For Year Ending: _____ *Membership Number*_____

Check Number: _____ *Date Paid:*_____

Check Amount: _____