Rainberry Bay Directory

Hard Copy (Printed) & Electronic (password protected) Directory

Please provide the information you want to have included in the next Directory.

Please PRINT CLEARLY so there are no mistakes. Thank you.

Name:	
Name:	
Address:	
Names, addresses & phone number	ers of all residents will be included in the directory.
you DO NOT WANT a phone number in	the directory, WRITE NO in the box to the left of it.
blank box means the phone number will	I be in the directory. An X in the box means nothing.
Land Line (if any):	
or	
Cell Phone: ()	Name:
Cell Phone: ()	Name:
	Name:
Email Address:	Name:
Email Address:	Name:
Signature	Date
Signature	Date
Please take or mail the con Rainberry I 2801 Rainb	mpleted form to the management office at:
Delray Bea - OR	perry Circle ach, FL 33445

Thank you,

Char Lane, Directory Chair