

Avalon Resident Information Form

Name(s)_____ Move-in date_____

Address_____ Own or lease (circle one)

Phone number(home)_____ (work) _____

E-mail address _____

Emergency contact name_____ phone_____

Please return to: AHOA, c/o Homeland Neighborhood Mgt. P.O. Box 320248, Flowood, MS 39232 or
email: info@homelandmgt.com

For privacy purposes, this information will be used for management purposes only of the Avalon Homeowners Association.

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