

FAIRWAYS AT HANGING ROCK, SECTION 2, HOMEOWNERS' ASSOCIATION, INC.

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Name of Owner: _____

Address: _____

Phone Number: _____

Email Address: _____

Number of Pets
In Household:

Cats: _____ Dogs: _____

Breed of Each Pet:

1) _____

2) _____

Estimated Weight At Maturity:

1) _____

2) _____

*I have read and understand the Rules and Regulations of The Fairways at Hanging Rock, Section 2,
Homeowners' Association and will comply.*

Signed: _____ Date _____

Signed: _____ Date _____