



## EMAIL SIGNATURE CONSENT

Michigan Law requires a written signature to be kept on file for all corresponding emails from the Association Board. Please fill in the form for our records if you would like to receive emails from the Association Board.

Date: \_\_\_\_\_

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email address:  
\_\_\_\_\_

First name: \_\_\_\_\_

Last name: \_\_\_\_\_

Email address:  
\_\_\_\_\_

I hereby give my written consent to allow the Board Members of Winter Oaks Condominium Association to send all information to me by my email address.

Signature \_\_\_\_\_

Signature \_\_\_\_\_

**Please submit this form to the Board Mailbox next to the 264 Winter Oaks West mailbox.**