



ASSOCIATION MEMBERSHIP CONTACT INFORMATION:

Please complete the following form to insure proper notification of all Champions Village Association meetings, activities, notices and other business.

Contact Information:

(Please complete the following)

Last Name First Name Spouse

Children (include birth month and year MM/YY)

Street Address:
Muskego, WI 53150

(____)____-____ _____ _____
Phone Number Lot # (If known) If new owner, name of previous family.

Email Address

Communications Release:

(Please circle your response to each question)

1. I give my permission to the Champions Village Association to send all required notices to me via email and no longer require notification via US Postal Service.

Yes No

2. I give my permission to the Champions Village Association to publish my contact information in the Champions Village Association Directory to be shared with all Association members:

Yes No

Please mail or drop off completed form to:

John Hrovatin (Treasurer)
Champions Village Homeowners Association
W130 S9623 Jimmy Demaret Drive
Muskego, WI 53150

Thank you,
Board of Directors