

SPYGLASS SUMMIT ASSOCIATION PHONE DIRECTORY REGISTRATION FORM

Homeowner Name(s): _____

Address in Spyglass: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

GATE DIRECTORY:

Please complete below fields for anyone who needs to be programmed into the gate callbox directory for your lot:

- | | |
|---------------|-----------------------------------|
| 1. NAME _____ | PHONE NUMBER FOR DIRECTORY: _____ |
| 2. NAME _____ | PHONE NUMBER FOR DIRECTORY: _____ |
| 3. NAME _____ | PHONE NUMBER FOR DIRECTORY: _____ |
| 4. NAME _____ | PHONE NUMBER FOR DIRECTORY: _____ |

Alternatively, if you prefer all calls for your lot to go to one main line, please enter that phone number below and the listing will be labeled as your address in the directory:

PHONE NUMBER FOR DIRECTORY: _____

Email the completed form to jpoulton@actionlife.com, or mail back to:

SPYGLASS SUMMIT ASSOCIATION, C/O Action Property Management, 750 B Street, Suite 2860, San Diego, CA 92101