

P.O. BOX 480383 Fort Lauderdale, FL 33348-0383 https://birchparkbeachhoa.org

## Member HOA Application TWO YEAR MEMBERSHIP - January 31, 2026

Please print and complete this form.

Property Address:		
Owner(s) Nan	ne(s):	
Vacation Rent	cal: Please circle one (Yes or No). If yes, is there a Management Compan	y or main <b>Point of</b>
Contact?		
Member #1	Name:	
	Email:	
	Cell Phone Number:	
Member #2	Name:	
	Email:	
	Cell Phone Number:	
Signature of N	Member #1:	Date:

Once completed please provide a check or money order in the **sum of \$50.**Make payable to: **Birch Park Beach Homeowners Association**Mail to **P.O. Box listed above**.

An email will be provided to confirm your paid membership.

On behalf of your HOA Board Members, we look forward to your membership and continued support!