

Overbrook Gardens Association
Maria Hallabrin, Membership Chairman
P.O.Box 202
Englewood, FL 34295

Date_____

Name_____

Overbrook Gardens Address_____

Are you a:

_____ Full Time **OR** _____ Part Time Resident? (from_____to_____)

If part time, what is your primary mailing address:

_____ State Zip

Phone number for directory_____

Email Address_____

Is this a rental property? _____Yes _____No

Fees:

\$50.00 Regular membership _____

\$75.00 or more Patron membership _____ (special listing in directory)

\$ 2.50 for mailing Directory _____

Total Enclosed \$_____

PLEASE MAIL ENTIRE FORM TO ABOVE ADDRESS WITH CHECK
Thank You