



**OLD LAS PALMAS NEIGHBORHOOD ORGANIZATION**

**CONFIDENTIAL  
NEW MEMBER CONTACT INFORMATION**

**Owner/Resident Name(s):** \_\_\_\_\_

**Old Las Palmas Neighborhood address(es):**

(1) \_\_\_\_\_ Palm Springs, CA 92262

(2) \_\_\_\_\_ Palm Springs, CA 92262

**Mailing Address:**

(If different from Palm Springs address; please indicate when it is to be used)

All year?

**OR**  
between \_\_\_\_\_

Month

and \_\_\_\_\_

Month

**Palm Springs Telephone No:** \_\_\_\_\_

**Cell or Other Phone:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

Preferred for  
OLPNO mail

**Spouse/Partner Phone** \_\_\_\_\_

**Spouse/Partner E-Mail:** \_\_\_\_\_

**Name/Relationship**

**&**

**Phone**

**Emergency Contacts:**

(e.g., someone with access to the property; and/or a relative)

1) \_\_\_\_\_

2) \_\_\_\_\_

**Alarm Company:** \_\_\_\_\_

**If property is rented full-time, name(s) of residents:** \_\_\_\_\_

**Would you like to be listed in an OLPNO membership directory?**

No,  Yes, or with immediate neighbors only?  Yes

**Any dogs?** Yes  # \_\_\_\_\_ **Cats?** Yes  # \_\_\_\_\_ **Other pets?** Yes  # \_\_\_\_\_

**Membership dues paid:** *Amount* \_\_\_\_\_ *Date* \_\_\_\_\_ *Check No.* \_\_\_\_\_

*Suggested: \$75 or more* \$ \_\_\_\_\_

**Are you interested in financially supporting a security patrol?** Yes  No

At any time, changes to the above information may be sent by e-mail or mail to:

Gary Grace  
Treasurer, OLPNO  
PO Box 2658  
Palm Springs, CA 92263

Or to the database manager:

e-mail: [OLPNOPalmSprings@dc.rr.com](mailto:OLPNOPalmSprings@dc.rr.com)