



SNOW BIRDS FORM

If you are leaving for the winter months and would like to receive all mailings from the WPOA/WRWSD office, please fill out the form below and return it to the office before your departure.

NAME: _____

ADDRESS: _____

DEPARTURE DATE: _____

RETURN DATE: _____

FORWARDING ADDRESS: _____

WINTER PHONE NUMBER: _____

EMERGENCY CONTACT PERSON: _____

EMERGENCY CONTACT NUMBER: _____