*WHOA Memberships are non-transferable / non		ble / non-refundabl
WHOA 2024 Member	ership Application \$50.00 per calendar year	5637
Name of Voting Member	Membership \$ Additional Directory (if applicable): \$25.00	- (E)
Address City, State, Zip Code	Entrance Fund (optional) \$ Newsletter Fund (optional) \$ Event Fund (optional) \$	- - -
Phone Number	Register Online: wedgefieldcommunity.com/membership-pa	ayment
Email Address	Complete form and mail check to: Wedgefield Homeowners Association PO BOX 905. Christmas. FL 32709	

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