**2020 – 2021 MEMBER INFORMATION FORM**

UNIT # Click or tap here to enter text. UNIT SIZE Choose an item.

PRIMARY CONTACT NUMBER Click or tap here to enter text.

ALTERNATE CONTACT NUMBER Click or tap here to enter text.

EMAIL Click or tap here to enter text.

***\*Email address is for the use of management as an alternative to paper correspondence and will not be shared without prior permission.***

**In case of emergency contact:** (someone **not** living in the unit)

Name Click or tap here to enter text. Phone Number Click or tap here to enter text.

Members in the unit *(Those listed on the Occupancy Agreement)*

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

Please list all other ***non-member*** occupants in the unit *(including children and guests)*

Name Birthdate Relationship

dd/mm/yy to member

Click or tap here to enter text. Click or tap to enter a date. Click or tap here to enter text.

Click or tap here to enter text. Click or tap to enter a date. Click or tap here to enter text.

Click or tap here to enter text. Click or tap to enter a date. Click or tap here to enter text.

Click or tap here to enter text. Click or tap to enter a date. Click or tap here to enter text.

**Vehicle Information**

Number of vehicles belonging to unit Click or tap here to enter text.

Year, Make & Model of Vehicle #1 Click or tap here to enter text. Colour Click or tap here to enter text.

License Plate # Click or tap here to enter text. Plate Sticker Expiry Click or tap here to enter text.

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License Plate # Click or tap here to enter text. Plate Sticker Expiry Click or tap here to enter text.



***Unit #*** Click or tap here to enter text.

**Pet Information**

Number and Type of Pets

Cats Click or tap here to enter text. Dogs Click or tap here to enter text.

Other (specify) Click or tap here to enter text.

Name of Pet Click or tap here to enter text. Breed Click or tap here to enter text.

Colour / Description Click or tap here to enter text.

Licensed? Choose an item. Vaccinated? Choose an item.

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Colour / Description Click or tap here to enter text.

Licensed? Choose an item. Vaccinated? Choose an item.

Additional Pet Information (if required) Click or tap here to enter text.

**Insurance**

Do you have personal liability & property insurance? Choose an item.

What is Personal Liability Insurance? It is the insurance that a co-op member would buy, as an individual, in order to protect themselves against being found liable if they accidentally injure another person or damage their property. Without this insurance, the co-op member would have to pay out of their own pocket. It is normally included as part of a contents and liability package, which also protects the member’s personal belongings. All members in a co-operative are encouraged to obtain their own personal liability coverage.

Occupancy By-Law Article 5.4 states “*Members can obtain liability & property insurance for their unit. The co-op, its staff, contractors and other members will not have any liability to a member or a person in a member’s household for things that would be covered by a normal renter’s or co-op member’s insurance policy. It does not matter what caused any loss and it does not matter whether the member or anyone in the household had any insurance.”*



***Unit #*** Click or tap here to enter text.

**Emergency Information Sheet**

Does anyone in your unit need assistance leaving your unit in case of an emergency?

Choose an item. Details Click or tap here to enter text.

Does anyone in your unit have hearing problems that prevent them from hearing a smoke alarm?

Choose an item. Name Click or tap here to enter text.

Does anyone in your unit have visual problems that would prevent them from leaving your unit in an emergency?

Choose an item. Name Click or tap here to enter text.

Does anyone in your unit use oxygen or other breathing equipment?

Choose an item. Name Click or tap here to enter text.

Are there any other accommodation requests we should be aware of? Click or tap here to enter text.

It is important to keep the office up to date on any changes to the information contained in these forms.

Signature of Member (s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date Click or tap to enter a date.

Winkleigh Co-operative Housing Corporation

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