

Island West, HOA

Board Member Application Form

Name: _____

I own # _____ Island West, HOA

I have been a property owner since: _____

My background is: _____

My skills and background would benefit the community of Island West, HOA because:

Promptly return this application by fax 843-785-3901, email or by mail:

Dave Lewellen, PCAM®
% Island West, HOA
2 Corpus Christi Ste #302
Hilton Head Island, SC 29928

Email: Dave@imchhi.com
Email: JPowell@imchhi.com

** Applications will be included in Annual Meeting package exactly as they are received by management.**