CANYON VISTA POOL ASSOCIATION Sale and Transfer of Ownership

Note: Neither the Canyon Vista Pool Association (CVPA) nor its Board of Directors assume any responsibility for financial negotiations or collections for Sellers or Buyers. Upon receipt of the completed Sale and Transfer of Ownership Form and verification of eligibility, CVPA will consider this Sale and Transfer to be complete.

Instructions:

- 1. Print or type the information requested below.
- 2. The new and previous members must provide all information requested where applicable.
- 3. Sign and date this form.
- 4. Send the completed original of this form to the following address:

CVPA, P.O. Box 4634, White Rock, NM 87547

Membership Number	New Member's Name (last, first, middle)			3	Spouse's Name, if any (last, first, middle)			
Street Address		City					State	Zip Code
Home Phone		Work Phone		E-mail				
Previous Member's Name (last, first, middle)				Spouse's Name, if any (last, first, middle)				
Street Address			City				State	Zip Code
Home Phone		Work Phone		E	E-mail			
terms and condition Regulations promote This Sale and Tran	ons set forthulgated by the sfer shall no nd shall hav	er and/or spouse the in the attached Agree he board as the same at be in effect until the econsented hereto be Association.	ement a are ame e Associa	and in the ended fro ation shal	Associatio m time to t I have satis	on's By-Laws time. sfied itself a	s and any	Rules and ransferee's eligibility
Dated this	day of _	,	20	÷				
Member's Signature				Member's Spouse's Signature (if any)				
Transferee's Signature				Trar	Transferee's Spouse's Signature (if any)			
above Sale and Tra	nsfer and re	FER: The Canyon Vista cognizes the transfered estanding assessments	e as bein	g entitled	to all rights			usly enjoyed by the
Signature of the Membership Director, Canyon Vista				ssociation	 n, Inc.	Date Sign	ed	
Signature of the Treasurer, Canyon Vista Pool Association, Inc.						Date Signed		