GUEST REGISTRATION 31

RENTAL ADDRESS: _____ **UNIT:**_____
Resident's Name: _____
Guest's Name: _____
Guest's Name: _____
Make of Car: _____ Model: _____ Color: _____ State & License #_____
Pets: ☐ Yes ☐ No Description: _____
Arrival Date: ____ ____ ____ Departure Date: ____ ____ ____

Parking is to be in designated areas. If there is a question, please call us.
Please remember, unauthorized pets are not permitted.

_____ _____
Owner/Agent Date Resident Date

Equal Housing Opportunity ***Oregon Rental Housing Association, Inc.***

WARNING: *No portion of this form may be reprinted without written permission of the Oregon Rental Housing Association, Inc.*
© Copyright 2007 Rev.1/07

PREVIEW ONLY