



Neighborhood Association Registration Form

Date: _____

Neighborhood Association Name: _____

Contact Person: _____

Address _____

Phone: _____ Email: _____

Please list below the executive officers:

Position	Name	Address	Email

Define your neighborhood boundaries:

North: _____

South: _____

East: _____

West: _____

Please email this completed form along with a copy of the association constitution and by-laws and any additional information that the association has used in organizing to angela.vanrooy@bloomington.in.gov. Alternatively, you may mail the documents to Angela Van Rooy at the address below.

401 N. Morton
PO Box 100
Bloomington, IN 47402

City Hall

www.bloomington.in.gov/hand

Rental Inspections: (812) 349-3420
Housing Division: (812) 349-3401
Fax: (812) 349-3582