



**REGISTRATION AND MEMBER PROFILE FORM (Keep a copy for your records)**

**Historic Neighborhoods Security Association (HNSA)  
(Serving Heritage Hills, Mesta Park, and Heritage Hills East)**

<b>HNSA Membership Registration Form</b>	<b>(Complete Fields Below)</b>
Name(s)	
Neighborhood	Mesta Park
Billing Address 1	
City, State, Zip Code	
Property Address 1:	
City, State, Zip Code	
Home Phone:	
Work Phone:	
Email Address:	
Interested in HNSA Service	Volunteer - Please circle: Yes or No Serve on HNSA Board - Please circle: Yes or No
Need any Special Items Delivered by an HNSA Patrol Officer	<input type="checkbox"/> HNSA Car Decal # _____ <input type="checkbox"/> Hotline (phone) Stickers # _____ <input type="checkbox"/> HNSA Yard Sign # _____ <input type="checkbox"/> HNSA Security Patrol Fact Sheet

**Billing Information:**

Dues are prepaid so that the number of patrol hours can be determined each month. There are two options to pay your dues.

Please check one of the boxes below.

- Check or Money Order (a one time annual fee payable to HNSA for the amount of \$420.00)
- Monthly EFT (a monthly electronic fund transfer of \$35.00 from a checking or savings account).

If you are choosing to pay monthly by electronic banking draft, please complete the EFT form and ***attach a canceled check.***

**Remit:            Neighborhood Services Corporation  
                      Attn: HNSA New Member  
                      1322 S. Fretz Drive  
                      Edmond, OK 73003**

405.348.1436 ([office@neighborhoodsplus.com](mailto:office@neighborhoodsplus.com))

**IMPORTANT! PLEASE COMPLETE MEMBER PROFILE INFORMATION ON BACK  
Please do not write in the blank (top, bottom, right or left) margins on the back side.**

<b>HNSA Member Profile Information</b>	<b>(Complete Fields Below - WRITE CLEARLY USING DARK INK this form may be transmitted electronically to the Patrol Officers)</b>
Emergency Phone Contact Number (fastest contact):	Name _____ Phone Number _____
Description of Cars at Home Regularly (Model/Color/tag #)	Car 1: _____ Car 2: _____ Car 3: _____ Car 4: _____
Names of Other Individuals Living at Residence or Regular and Authorized Visitors	Person 1: _____ Person 5: _____ Person 2: _____ Person 6: _____ Person 3: _____ Person 7: _____ Person 4: _____ Person 8: _____
Pets	<input type="checkbox"/> In House <input type="checkbox"/> In Yard <input type="checkbox"/> No Pets
Alarm Company	Name: _____ Phone: _____
Handling Instructions for House Checks	Mail: <input type="checkbox"/> Pickup <input type="checkbox"/> Leave in mailbox Newspapers: <input type="checkbox"/> Pickup <input type="checkbox"/> Leave on/in (location) _____
Miscellaneous	Fence Gates Locked: <input type="checkbox"/> Yes <input type="checkbox"/> No Lights left on: <input type="checkbox"/> Porch <input type="checkbox"/> Upstairs <input type="checkbox"/> Downstairs <input type="checkbox"/> Other ( _____ )