



SEAWINDS II RESORT

Electronic Information Acceptance Form

(Another way to communicate to our owners)

Owner's Name: _____

Mailing Address: _____

E-Mail Address: _____

Telephone Number: _____

Owners Signature: _____

Co-Owners Signature: _____

Date: _____

My/our signature is to confirm that I/we authorize the SeaWinds II Condominium Trust to issue future communications over the internet via e-mail and/or Owners Section Web page. This authorization shall remain in effect until it is formally withdrawn or modified by me/us via e-mail, US mail or fax to SeaWinds II Resort and confirmed as received. I/we understand that our annual maintenance invoices and newsletters will continue to be delivered via US Mail until otherwise notified by either VRI or the SeaWinds II Condominium Trust.

Material to be communicated by e-mail may include General Resort Updates, Annual Owners Meeting Notices, and Minutes of Annual Owners Meetings.

Please complete this form and mail it to SeaWinds II, c/o VRI, P.O. Box 399, Hyannis, MA 02601 or Fax to (508) 394-6012 or E-Mail a signed and scanned copy to the following e-mail address: jeff@theriverviewresort.com.

Thank you.

Jeff Farres, President
SeaWinds II Resort