

Seaside Directory Information:

Household Name: _____

Mailing Address: _____

Street Address: _____

City, State Zip: _____

Household Phone: _____ Community: _____

ADULT MALE:

Full Name: _____

Preferred Name: _____ Member of Seaside? Y N

Cell Phone: _____ Email: _____

Birth date: _____ Marriage Date: _____

ADULT FEMALE:

Full Name: _____

Preferred Name: _____ Member of Seaside? Y N

Cell Phone: _____ Email: _____

Birth date: _____

Names of those Photographed: (if child, add their date of birth)

Internal Use:

Photography Date: _____ Number: _____