WAITING LIST REQUEST

Please print this form, enter the information, and FAX to (972) 237-7560 Or email to mday@gptx.org

NAME:	DATE:						
	(First)			(Last)			
HOME ADDRESS:				WORK ADDRESS			
	(C:t-:)	(Ctata)	(7:-)	(C:4x)	(Choka)	(7:-)	
	(City)	(State)	(Zip)	(City)	(State)	(Zip)	
PHONE:	Home:	(Ama Cada)	(Nivershow)				
	Business:	(Area Code)	(Number)				
	C-11/M-1-11-	(Area Code)	(Number)				
	Cell/Mobile:	(Area Code)	(Number)				
	FAX:	(A C - 1-)	(NI1)				
	Email	(Area Code)	(Number)				
TVPF OF	T HANGAR PREF	EDDEN.					
THEOF		sed T-Hangar v	v/Storage				
	□ Enclos	sed T-Hangar					
		Open-Sided					
	_	ge Only					
period of o	number of requests one year from the dat It will then become i	e of the request.	After the sp	ecified time peri	od, your name wi	ill be	
unable to c	t will be made to cor contact you or our ca g list and the next par	ll has not been r	eturned with				
			(Si	gnature)	(Da	te)	
=	or Facilities: ghest Priority - Ter	•	s that flood	nodated in this	·	,	

Tenants wanting a better facility will be accommodated in this order:

Tenants leasing a Tiedown from Howell's or the City may move to an open-sided, patio hangar, or enclosed hangar (if available)

Tenants in an open-sided, patio hangar may move to an enclosed hangar Sub-tenants may move to an open-sided, patio hangar, or enclosed hangar (if available)