

WELLINGTON CENTRE
Proxy Card and/or Sticker Authorization Form

Date: _____

Name: _____

Company: _____ Suite # _____

← Please register all vehicles, whether or not they are regularly driven to work and parked in the garage. →

Auto #1 Make/Model of Car/Truck: _____
 Color of Car/Truck: _____ Year: _____ **License #** _____

Auto #2 Make/Model of Car/Truck: _____
 Color of Car/Truck: _____ Year: _____ **License #** _____

This letter authorizes Wellington Centre to issue the above named person the following (please check the applicable boxes).

- Proxy Card- Garage access
- Proxy Card- Door access
- Sticker(s)

Authorized by:

Printed Name and Title

This area for Management Office Use Only:

Proxy Card Number Issued _____
C ___ K ___ B ___ A ___ *
Sticker for Car # 1 _____
Sticker for Car #2 _____

Additional Notes: _____

