

**Playa Linda Beach Resort Form For Removing Names**  
**Please print this form and send to Playa Linda Beach Resort by postal mail.**

**Re: Membership of:**

**Suite Number(s):**

**Week Number(s):**

**Please be advised that I Agree to sell and transfer any and all rights I may have as a result of a contract between Playa Linda and myself pertaining to suite(s) and week(s) mentioned above. This is being done with my consent and I do hereby acknowledge that in accordance with Article 13, paragraph 4 of Articles of Association the undersigned:**

**Name:**

**Name:**

**Name:**

**Address:**

**Phone/Fax:**

**E-Mail:**

**Will be sole-owner (s) of the respective interval in Playa Linda Beach Resort and do hereby acknowledge that they accept a membership in the Association and that they will adhere to the Article of Association and the By-laws of the Association.**

**Seller signature:**

**Seller signature:**

**Buyer signature:**

**Buyer signature:**

**Place:**

**Date:**

**For Approval:**  
**(by Playa Linda Beach Resort)**

**This form must be notarized and sent by postal mail.**

**Your maintenance fee must be paid.**

**You must include:**

**A check in the amount of US\$105.00 representing the transfer fee and your original share certificate, death certificate and notary letter, and original membership card(s).**

***Postal mail address:***

***Telephone:***

Playa Linda Beach Resort

011-297-586-1000

J. E. Irausquin Boulevard 87

***Fax number:***

Oranjestad, Aruba

011-297-586-3479

Dutch Caribbean