

# BERKELEY SWIM CLUB

P.O. BOX 24, BERKELEY HEIGHTS, NJ 07922 (908) 464-2125

Date \_\_\_\_\_

## 2011 NEW MEMBERSHIP APPLICATION

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Bus. Phone \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ NJ Zip \_\_\_\_\_

E-mail address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Occupation of applicant \_\_\_\_\_

Have you ever been a member before?:  Yes  No

Type of membership (check one):  Family  Couple  Single  Associate

**First Names**

Husband/Wife	<u>Child</u>	<u>Birthdate</u>	<u>Age</u>	<u>Child</u>	<u>Birthdate</u>	<u>Age</u>
_____	1. _____	_____	_____	4. _____	_____	_____
_____	2. _____	_____	_____	5. _____	_____	_____
	3. _____	_____	_____	6. _____	_____	_____

May we use this information in our membership directory?  Yes  No

Emergency contact: Name \_\_\_\_\_ Phone \_\_\_\_\_

How did you learn of Berkeley Swim Club? \_\_\_\_\_

Bond option chosen: (Deferred in 2011)

Paid in full  Payment Plan

Membership Fee \$ \_\_\_\_\_  
 Application Fee (Waived in 2011)  
 Bond Payment (Deferred in 2011)  
 Associate Fee # \_\_\_\_ X \$100 \$ \_\_\_\_\_  
 =====  
 Total Enclosed \$ \_\_\_\_\_

NEW MEMBER FEES – 2011	DUES
FAMILY- <b>Special**</b>	\$600
COUPLE	\$550
SINGLE	\$450
ASSOCIATE	\$100

\* Bond may be paid in full or may be paid over a period of three years at \$200/year for a total of \$600. If you do not remain a member of the Club before the bond is paid in full or default in payment, previous payments will be forfeited.

\*\* *Must be a first time member to receive special rate.*

*This application is subject to the action of the Membership Committee, and the right to refuse the application is reserved.*

**AGREEMENT:** I hereby certify that the above information is true and that I have read the Rules & Regulations. I understand that any violation of the Rules & Regulations may cause cancellation of Membership without a refund. (Please refer to the Water Log for your copy of Rules & Regulations).

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_