

# FOREST HILLS SWIM CLUB

## APPLICATION FOR MEMBERSHIP 2016

**Checks should be made payable to: Forest Hills Swim Club**

Please **PRINT** the information below, and return this form to us with your payment.  
For questions please call the number below or email the address below:

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (B) \_\_\_\_\_ (C) \_\_\_\_\_

Children's first names, living in the same household:

	Age: _____
	Age: _____
	Age: _____
	Age: _____
	Age: _____
	Age: _____

Name of Baby Sitter: \_\_\_\_\_

* Basic Club Membership:	\$325.00	\$ _____
* Children Two and Older:	\$ 25.00 (each)	\$ _____
* Single Adult Membership	\$275.00	\$ _____
* Baby Sitter's Pass Fee:	\$ 25.00 (each)	\$ _____
* Book of Ten Guest Passes:	\$ 30.00 <small>good 2016 only</small>	\$ _____
* Credit for early Membership:	\$ 30.00 (by 3/31/16)	\$ _____

Total Amount Due: \$ \_\_\_\_\_

**Notes:**

- \* Children under the age two are admitted at no cost with the basic membership.
- \* Guests must come with a Pool Member. Baby Sitter must come with Pool Member's children.
- \* Credit for early Membership must be received by March 31, 2016
- \* Household is one family that lives together...No joint families.
- \* Single Membership means one adult living independently in the household.
- \* Basic Club Membership includes two adults living in the same household.

Signature Required for Membership: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Forest Hills Swim Club**  
**P.O. Box 1425 Salem, VA 24153**  
**Phone: Mark Lynch 776-8501 or Email MLYNCH1423@AOL.COM**