



For Willowood Use

Bond # _____

MS# _____

For Willowood Use

Membership Application

Name of primary applicant _____

Street Address _____

City, State and zip _____

Telephone No. _____ Email Address _____

A **Family Membership** is defined as a head of household, his or her spouse, (if any), and all **dependent** children, (regardless of age), that reside in that household. It does not include, in laws, grandparents, brother and sisters of the head of household, or day care children that are kept by the person holding the membership.

A **Couple Membership** is defined as head of household and his or her spouse. OR a head of household and a single dependent child (regardless of age).

Check the boxes for your membership type

Family Bond	\$300	<input type="checkbox"/>
Couple Bond	\$300	<input type="checkbox"/>
Single Bond	\$150	<input type="checkbox"/>

Family Dues	\$125	<input type="checkbox"/>
Couple Dues	\$85	<input type="checkbox"/>
Single Dues	\$42.50	<input type="checkbox"/>

TOTAL \$ _____

CHECK# _____

The following persons are to be included in the membership

Primary Member _____ Spouse _____

Child Caregiver (if applicable) _____ Date of Birth _____

The Child Caregiver membership is for one person, who is not a member of your household or a pool member, but is employed, or assigned by you to watch your children in your stead. This membership is to be purchased in addition to your family membership at a cost of **\$85** and will be valid for one season. The "childcare person" must be at least 18 years of age. This membership permits them to bring children who are listed on your family membership to the pool. The caregiver is a special category member, and as such will have no member voting rights. They will be responsible for your children and it is expected that they will ensure that pool rules are obeyed at all times. This can be purchased at any time during the pool year.

Name of Children	Date of Birth	Name of Children	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The undersigned hereby submit application for membership in the Willowood Swim Club and agree that if accepted they will abide by the rules, regulations, and by-laws of the Corporation. Signature of Parent or Legal Guardian indicates responsibility of all rules and club by-laws. It is understood that there are no set membership dues, but that the costs of operation will be billed proportionally each year. The membership fee should accompany this application. In event the membership is withdrawn up to 75% of the membership fee will be returned when the conditions specified in the by-laws are met.

Signature of Applicant _____ Date _____

(parent or legal guardian if under 18)

Signature of Co-Applicant (if applicable) _____ Date _____

Please make checks payable to 'Willowood Swim Club'. There will be a \$35 fee for returned checks.

Send with application to Willowood Swim Club P.O. Box 121 Elizabethtown, PA 17022