



APPLICATION FOR TRIAL MEMBERSHIP



The Board of Directors of Creekside Swim Club by due resolution have authorized the Director(s) whose name(s) appear herein _____ to execute this Agreement in behalf of the Club with _____.

The basic yearly membership dues cover membership for the Head of the Household. It may also cover one additional household member when applicable.

Upon completion of the one year trial membership, applicants who have completed two consecutive years of active participation as enumerated herein, who will promote the best interest of the Club; will be issued a Bond evidencing proprietary ownership in Creekside Swim Club in the face amount of \$125.00 under and subject to the conditions thereof; all of which are specifically incorporated herein by reference thereto.

Those applicants who have not completed two consecutive years of active participation will forfeit all moneys paid to Creekside Swim Club without credit and/or refund.

Notwithstanding anything herein to the contrary, the Board of Directors in their sole discretion, in any calendar year, may elect an applicant to propriety membership in the first or second year on request and after full payment where such action will promote the best interest of the Club, or; may declare any applicant who does not promote the best interest of the Club ineligible for membership as enumerated in the By-Laws and not invite the applicant to further participate in the activities of the Club. In such an event, after written notice thereof, all moneys paid to Creekside Swim Club will be forfeited without credit and/or refund.

1. Applicant(s) DESIGNEE NAME(S) exactly as it will appear on certificate:

_____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMPLOYER _____ POSITION _____

ADDRESS OF EMPLOYER _____

2. Person to be called IN CASE OF EMERGENCY: _____

Phone _____ Relationship _____

3. Family members living at home address (please include adult applicants)

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>DATE OF BIRTH</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Sponsors:

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

5. Signature of applicant(s)

_____ Date _____

_____ Date _____