

NEW MEMBER FORM

ROCKVILLE CENTER

PO Box 111

Rockville, VA 23146

Complete and return this form, along with your payment to the above address, by **May 1, 2011**. Checks should be made payable to "**Rockville Center, Inc.**"

Household Pool Membership Information

Last Name: _____

Address: _____

Phone(s): _____

Email: _____

Name Of Primary Household Member: _____ **\$265.00****

(If member is under 18 yrs of age, must have an adult contractually responsible.)

Names of Additional Members in the Household

(Each person must reside in the primary member household. Financially independent adult children should purchase their own membership.)

NAME	RELATIONSHIP	Age of Children	
1.			\$50.00
2.			\$50.00
3.			\$50.00
4.			\$50.00
5.			\$0.00
6.			\$0.00
7.			\$0.00
8.			\$0.00

Additional Non-Member Fees:

Babysitter – Non-household babysitter may only come while caring for member children **\$100.00**

Babysitter added for fee:

	Age	
1.		\$100.00
2.		\$100.00
3.		\$100.00

2012-2013 Payment Summary

Household Pool Initiation Fee (Required)

Option 1: Pay full initiation fee this year with annual dues (\$495) \$ _____

Option 2: Initial fee of \$250 paid by 5/1/12, Second \$245 installment billed on 9/1/12
Option 2 is available for credit card payments ONLY. \$ _____

Annual Pool Membership Dues

Primary Household Member Dues (Required) \$265.00**

Additional Members in the Household (\$50 each, maximum of \$200) \$ _____

Additional Non-Member Fees (Babysitter) \$ _____

Volunteer Service Opt Out Fee (\$30) *See below for Volunteer Options* \$ _____

Pool Guest Passes: 10 pool guest passes per booklet for \$40 ea. (\$50 Value)
of Guest Pass Booklets: _____ x \$40 \$ _____

****CASH DISCOUNT:** If paying by cash or check, take \$15 off your total. \$ _____

TOTAL \$ _____

For Credit Card Payments:

____ Visa ____ Mastercard Credit Card #: _____

Expiration Date: _____ Name on Card: _____

I understand that if I choose Option 2, \$250 will be charged now and \$245 will be charged to this card on 9/1/12.

Signature: _____

I understand that if I DO NOT pay the volunteer fee above, I am obligated to serve three hours of volunteer time at a Center work day or join a committee. Please indicate your choice below:

____ Attend 1 volunteer workday at the Center (there will be several throughout the year)

____ I will serve on a Center committee (committee opportunities will be provided upon registration)

____ **I would like someone to contact me with information about Swim Team.**

For Rockville Center Use ONLY

____ Cash ____ Check# _____ Amount: _____