2017 NEW MEMBER

THE ROCKVILLE CENTER PO Box 111 Rockville, VA 23146

For membership questions, please contact Jennie Burcham directly @ 804-749-3731

HOUSEHOLD POOL MEMBERSHIP INFORMATION			
Last Name:			
Phone:	Email:		
Current address:			
City:	State:	ZIP Code:	
PRIMARY HOUSEH	OLD MEMBER INFORMATION (MUST	BE AT LEAST 18 YRS OF AGE)
Name:			
Referred by:			
NAMES OF ADDITIONAL MEMBERS IN THE HOUSEHOLD (EACH MEMBER MUST RESIDE IN HOME OF PRIMARY MEMBER, AGE FOR MINORS ONLY)			
Name:	Relationship:		Age:
ADDITIONAL NON-MEMBER FEES: (Non-household babysitter may only come while caring for member children)			
Babysitter Name:	, , , ,	,	Age:
ANNUAL POOL MEMBERSHIP DUES			7.56.
Primary Household Member Dues			\$300
One-Time Initiation Fee			\$200
Additional Members in the Household + \$50 each, maximum \$250			+ \$
Additional Non-Member Fees (Babysitter) + \$100 each			+ \$
Volunteer Opt Out Fee (waive if you volunteer on committees or if you will participate on work days) + \$30			+ \$
Name of Committee:			
Pool Guest Passes: 10 pool guest passes for \$40.00 each book	det (\$50.00 value) # of Guest Pass	·	+ \$
CASH DISCOUNT: If paying cash or check		-\$15	- \$
		TOTAL DUE	\$
Please make your check payable to "The Rockville Center"			
Credit Card: () Visa () Mastercard Credi	t Card # CC 3 digit CVC#		
Expiration Date: Name on card:			
Signature:			
If you wish to donate to the Rockville Center Po "Pool Renovation Donation" in the memo field.			

For Rockville Center Use ONLY
_____ Cash _____ Check # _____ Credit Card Processed, date ____Amount: _____ Postmarked: ______

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confirmation for tax purposes.

Membership 5/1/17 through 4/30/18