

Nansemond Swim Club, Inc. P.O. Box 6080, Suffolk, VA 23433

APPLICATION FOR MEMBERSHIP

Name(s) (Print): _____ Date: ____/____/____
Street Address: _____ Phone: _____
City, State, Zip: _____ Alternate/Mobile Phone: _____
Email addresses: _____

Names of children, including birth dates & year:

Children must be 26 years old or under and residing in your household to be included in your membership.

Sponsors (signatures of two members in good standing required):

Signature #1 _____ Signature #2 _____
Printed Name #1 _____ Printed Name #2 _____

If you believe a current pool member should be credited with your joining the Nansemond Swim Club family please list their name here. One family only may receive credit: _____.

How did you hear about us: pool member, staff, advertising (signage, online), postal mailing, friends, other? _____.

Membership Options:

_____ Membership Transfer from Current Member:

I request a transfer of Membership Certificate # _____ from _____.

The current member's certificate and a letter notifying the Board of their intent to sell to you must accompany this application. Do not make any payments to the current member until the Board has approved the transfer.

_____ New Membership Purchase from NSC:

I request the purchase of a new membership from the Nansemond Swim Club.

Upon approval of this application, I agree to the below membership payment plan. I understand that payments begin upon notification of approval of this application and that payment is due by the 5th of each month. In addition, I understand that annual dues are due each April. Annual dues are pro-rated if application is between June 30 - Labor Day. In season, dues must be paid in full at the time of application. Membership and dues must be current to join swim team. Membership fees must be paid in full before issuance of a membership certificate.

Payment Plan:

_____ Pay in full - \$440
_____ Pay in two months - \$230, due at application and at 30 days _____.
_____ Pay in three months - \$165, due at application, 30 days, and 60 days _____.

_____ I will take advantage of promotional savings: Pay the \$440 joining fee and \$400 annual dues for 2017 season waived.

Terms of Membership:

I/We hereby expressly agree to abide by the established by-laws, rules, and regulations now or hereafter adopted by the Nansemond Swim Club, Inc. (the "Corporation"). I/We agree to pay the annual dues in order to use the facilities provided by the Corporation and to remain a member in good standing. I/We also understand that the Corporation may reject this application by refunding all monies paid thereon.

Legal Signatures of Applicant(s):

Sign name exactly as it should appear on the certificate. If more than one person will own the membership, each person must sign.

Signature: _____ Signature: _____
Print name: _____ Print name: _____

FOR OFFICIAL USE ONLY

Date Received: ____/____/____ Date Approved by Board: ____/____/____
Certificate Number Assigned: _____ Date Certificate Issued: ____/____/____

Signature of Board President: _____