

## Swim Membership Application

Name		DOB	
Email		Cell #	
Occupation		Bus #	
Spouse/Partner		DOB	
Email		Cell #	
Occupation		Bus #	
Address			
		Res #	
Children under 2	25 years old:		
Name	DOB	Name	DOB
Name	DOB	Name	DOB
Type of Membership: Single		Couple	Family
BTC members I	personally know:		
	ove and agree to acculations. Activities of		the club and to comply with ned by the By-Laws.
Date	Pate Signature		