

Swim Membership Application

Name _____ DOB _____

Email _____ Cell # _____

Occupation _____ Bus # _____

Spouse/Partner _____ DOB _____

Email _____ Cell # _____

Occupation _____ Bus # _____

Address _____

_____ Res # _____

Children under 25 years old:

Name DOB Name DOB

Name DOB Name DOB

Type of Membership: Single _____ Couple _____ Family _____

BTC members I personally know: _____

I endorse the above and agree to accept membership in the club and to comply with its rules and regulations. Activities of the Club are governed by the By-Laws.

Date _____ Signature _____