

Dumont Swim Club 2020 August Invoice

Membership #

MEMBERSHIP RATES

Family - \$495.00
Family II - \$460.00
Couple - \$435.00
Individual - \$275.00

Membership Rate \$

Additional Amount Enclosed \$ N/A

Total Amount Enclosed \$

Check Number #

Member Name: _____

E-Mail Address: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Home: _____

Work: _____

Cell: _____

Emergency Contact: _____

Phone: _____

Member Plan Names	Relationship	Date of Birth	Sex
	SELF		
	SPECIAL		

By signing below, it is understood and agreed that:

- Persons included in the membership shall be only those members of applicant's immediate family (children 21 years and under). I understand that I am responsible to notify the Dumont Swim Club Board of Trustees of any changes that occur to the membership family during the current season.
- All persons included in the membership (and their guests) shall abide by the Rules & Regulations of the Dumont Swim Club. Failure to do so will result in the termination of the membership and forfeiture of all fees

I certify that the information above is valid and correct. I further understand and agree that any incorrect information given shall be significant cause to terminate this membership.

By signing below, I hereby acknowledge that I have read and clearly understand the By-Laws of the Dumont Swim Club

☒ I have received the By-Laws

☒ I have received the Rules & Regulations

Signature: _____

Date: _____

Please mail to: Dumont Swim Club • PO Box 133 • Dumont, NJ • 07628

dumontswimclub@gmail.com

201-387-1560

Manager Initials