2023 NEW MEMBER

THE ROCKVILLE CENTER PO Box 111 Rockville, VA 23146

For membership questions, please contact Matt Reynal at RockvilleCenterMembers@gmail.com

HOUSEHOLD POOL MEMBERSHIP INFORMATION						
Last Name:						
Phone:	Email:					
Current address:						
City:	State:		ZIP Code:			
PRIMARY HOUSEHOLD MEMBER INFORMATION (ONE INDIVIDUAL, 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:	
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Name:	Relationship:				Age:	
Name:	Relationship:				Age:	
Name:	Relationship:				Age:	
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						
Primary Household Member Dues						\$380
One-Time Initiation Fee						\$200
Additional Members in the Household + \$50 each, maximum \$250					+	\$
Additional Non-Member Fees (Babysitter) + \$100 each					+	\$
Interested in volunteering on a committee, workday, or at an	event? Check below	and we'll contact you!				
Yes/Maybe:						
Pool Guest Passes: 10 pool guest passes for \$40.00 each book	det (\$50.00 value)	# of Guest Pass B	Booklets:	X \$40	+	
CASH DISCOUNT: If paying cash or check				-\$15	-	\$
			TOT	AL 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 Pool Renovation, please write a separate check payable to "RSPF". Please note "Pool Renovation Donation" in the memo field. Donations are tax deductible. Once your check is deposited, you will receive confirmation for tax purposes.

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

Rev. 01/18/23

Membership 5/1/23 through 4/30/24