

2025 ACTIVE MEMBER

THE ROCKVILLE CENTER
PO Box 111
Rockville, VA 23146

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

Completed form and payment postmarked or placed in the drop box at the Rockville Center BEFORE May 1, 2025

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:		
NAMES OF ADDITIONAL MEMBERS IN THE HOUSEHOLD (EACH MEMBER MUST RESIDE IN HOME OF PRIMARY MEMBER, AGE FOR MINORS ONLY)		
Name:	Relationship:	Age:
Name:	Relationship:	Age:
Name:	Relationship:	Age:
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		\$400
Additional Members in the Household (all other members aside from primary)	+ \$50 each, maximum of \$300	+ \$
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: _____		
Pool Guest Passes: 10 pool guest passes for \$40.00 each booklet, a \$50.00 value		
	+ # of Guest Pass Booklets: X \$40	+ \$
2024 INACTIVE (IF APPLICABLE):	+ \$50	+ \$
CREDIT CARD FEE: If paying by card add	+ 5.0%	+ \$
LATE FEE: IF POSTMARKED MAY 1, 2025, OR LATER PLEASE ADD	+ \$35	+ \$
TOTAL DUE		\$

Please make your check payable to "The Rockville Center"

redit Card: () Visa () Mastercard Credit Card # _____

CC 3 digit CVC# _____

Expiration Date: _____

Name on card: _____

Signature: _____

If you wish to donate to the Rockville Center for future pool projects, please write a **separate** check payable to "Friends of the Rockville Center". Please note "Pool Projects Donation" in the memo field. Donations are tax deductible. Once your check is deposited, you will receive confirmation for tax purposes.

Annual Membership 5/1/25 through 4/30/26

Rev. 02/03/2025

For Rockville Center Use ONLY

_____ Cash _____ Check # _____ _____ Credit Card Processed, date _____ Amount: _____ Postmarked: _____