

**Westwood Heights Swim Club Application for
Associate Membership 2018**

Date: _____ Referring Member Name: _____

Applicant's Name: _____

Spouse's Name: _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Names and Birthdates of Children: _____

Other Permanent Family Residents: _____

Are you interested in receiving information on volunteering and/or getting involved with the Pool Board? _____

I hereby apply for Associate Membership in the Westwood Heights Swim Club, Inc., which will entitle my immediate family and me to full use of the Club facilities as governed by the Rules and Regulations of the Club.

Upon acceptance of this application by the Club, I agree to pay the sum of three hundred ninety-five dollars (\$395.00) representing membership dues for the 2018 Swim Season.

If today's date is July 15, 2018 or later, I agree to pay the sum of three hundred dollars (\$300.00) representing membership dues for the remainder of the 2018 Swim Season.

I understand that this Associate Membership shall be limited to one (1) season and I further understand that an Associate Membership does not entitle me to a vote in the Corporation. I understand that to retain membership after this initial season, I must become a Bonded Member the following season or any season thereafter by purchasing a bond (stock certificate) from Westwood Heights Swim Club for three hundred dollars (\$300.00) and paying annual membership dues as pursuant to the terms and conditions set forth in the Bonded Membership application.

Applicant's Signature: _____ Print: _____

Submit Application and Check made payable to Westwood Heights Swim Club to:

Westwood Heights Swim Club · 1636 N. Cedar Crest Blvd. #301 · Allentown, PA 18104 · P: 610-395-5972