Rollingwood Pool Application for Membership

Date		
Referred by (Current member,	if applicable)	
To the Board of <i>Rollingwood F P.O. Box 3191</i>		8(<u>www.rollingwoodpool.org</u>)
and agrees that if approved and	accepted, the applicant	ership in Rollingwood Pool, Inc., and all members of the family unit, as lations, and by-laws of the corporation.
<u>Please Print</u>		
Name		
Address		
City	State	Zip
E-Mail Address		
Phone (home)	(ce	11)
Applicant's Occupation		
Employer		
Spouse's Name		
Spouse's Occupation		
Employer		
		Age
		Age
		Age
Signature of Applicant		
I have enclosed the \$35.00 non	-refundable application:	fee. Check No.

Please refer questions to the Membership Chair (membership@rollingwoodpool.org)