

**FAIRFIELD-FAIRFIELD CREST SWIM CLUB, INC.
2008 MEMBERSHIP APPLICATION**

Name: _____

Address: _____

Phone: _____ Email: _____
(please provide if possible to save postage/copying)

Children:	<u>Name</u>	<u>Female/Male</u>	<u>Age on 5/31/08</u>
	_____	f m	_____
	_____	f m	_____
	_____	f m	_____
	_____	f m	_____

- 2008 Membership Type:**
- _____ Bondholder from previous year(s)
 - _____ New Member purchasing bond in 2008
 - _____ Associate Member (one year only; no bond purchase required)
 - _____ August Only Member

ANNUAL MEMBERSHIP FEES AND/OR BOND PURCHASE FOR SWIM CLUB MEMBERS

Annual Membership Fee – (choose one and list amount below)

- () Adult membership – 1 adult per household only \$115
(*must be a bond holder of at least 15 years*)
- () Up to 2 Adult(s) (*same household*) 265
- () Parent(s) Plus 1 child (*same household*) 290
- () Parent(s) Plus 2 children (*same household*) 315
- () Parent(s) Plus 3 children (*same household*) 330
- () Parent(s) Plus 4 children (*same household*) 345
(*Add \$15 for each additional child beyond 4*) + \$_____

AMOUNT DUE FROM ABOVE \$ _____

Other Fees

- Babysitter** – *if applicable, please list name* _____ **(\$50)** _____
- 2008 Capital Improvement Fund Assessment** – *everyone* 50.00
- Pool Opening Fee** – *everyone; refunded if Pool Prep Party attended* 50.00
- Late Fee** – *if applicable; current bond members postmarked after 4/30/08* **(\$25)** _____

* * * **FOR NEW MEMBERS PURCHASING A BOND IN 2008** * * *
There are 3 payment options available for bond purchase.

- () **Bond Purchase** – new bond-purchasing members only; due by 5/31/08 **(\$350).**\$ _____
- () **Split Bond Purchase** – 2 equal installments; 1st **\$175** due by 5/31/08, 2nd **\$175** due by 7/31/08 _____
- () **Finance Bond** – over 2 yrs, includes \$50 nonrefundable fee; 1st **\$200** by 5/31/08, 2nd **\$200** by 5/31/09 _____

The 1st installment and membership will be forfeited if the 2nd installment is not paid as agreed. Late fee of \$25 will be charged for late payment.

ANNUAL MEMBERSHIP / BOND FEE TOTAL \$ _____

Forms for current members are **due by 4/30/08** to avoid a late fee. Members not responding by 5/31/08 will be assumed to be taking a one-year leave of absence. Dues must be paid unless you are resigning or taking a one-year leave of absence (please refer to FFC Bylaws Article VII, Section 4). If you are resigning your membership, please email or call Jill Reader for instructions. Resignation request must be received in writing with surrendered bond by 5/31/08 to be considered within the 2008 year.

Please make checks payable to: **FFC Swim Club, Inc.**, and submit check, application and enclosed medical forms (medical forms are required by insurance) to Jill Reader, P.O. Box 933, Newark, DE 19715. If you have any questions, contact Jill at djwc@comcast.net or 302-562-0325. Thank you.

2008 FFC Swim Club Medical Information

Last Name _____

<i>Please Print</i>	First Name	Age	Name of Doctor	Phone # of Doctor	Date of Last Tetanus Shot	Allergies	Special Medical Considerations
Adult Member #1							
Adult Member #2							
Child #1							
Child #2							
Child #3							
Child#4							
Child #5							
Child #6							

Health Insurance Company: _____ Type: _____ Policy # _____ Group # _____

Emergency Contacts: In case of illness/injury, call in this order **beginning with parent's names and home, cell and work phone numbers.**

<u>Name (parents first)</u>	<u>Home Phone</u>	<u>Cell Phone</u>	<u>Work Phone</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Medical Release (optional): If I cannot be contacted in the event of an injury to or the sickness of my child, I hereby give my permission to the pool manager or his/her designee to administer first aid to or transport my child in order to obtain medical attention from a doctor or emergency center.

Signed: _____ Date: _____ Page ___ of ___