

# Robin Hood Swim Club

## Application for Pool Membership

**Membership Type** *(please check one):*

Family\*    Empty Nest\*    Single    Military    Temporary    August Only (\$99 Special)

*I understand that when I resign from full membership, I will be returned a sum equal to my membership fee paid, less 2% for each year of membership, not to exceed 10%, in accordance with the bylaws. I understand that membership in the club is not transferable except (1) among family members or (2) with the sale of my home. I understand that annual operating dues are not refundable. I agree to abide by the Charter and by-laws of the Corporation and the rules established for safe operation of the Club. (For more detailed membership information, please refer to the Pool Rules and Regulations.)*

**It is intended that the following persons, all of whom reside in my household, will use this membership:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Spouse's name, Children's names and dates of birth:

\*I understand that a membership is issued to only one (1) adult member of the family who shall be considered the proper representative of the family for purposes of refund upon resignation.  
Signature of Applicant (Family Representative)

\_\_\_\_\_ Date: \_\_\_\_\_

**Please mail fees and the Emergency Card to:**

**Teresa Smith  
1301 Atwood Rd.  
Silver Spring, MD 20906**

*Make checks payable to: Robin Hood Swim Club, Inc.  
Questions, call Clare Tock, Membership Director, (301)879-4391 or email [cktock@msn.com](mailto:cktock@msn.com)*