## Dolphin Swim Club Membership Application

Last Name:			
Husband:	Occupation:		
Wife:	Occupation: _		
Children: (Include Ages)			
Address:			
Email address:			
Phone #:			
Referred by:			
(5) Member Sponsor Signatures Required I attest that the above information is correct.		nsor this family f	or membership
2	4		
3	5		
Signature of Applicants:	Date:		
Please return to: Dolphin Swim Club/Membe Jennifer Klotz via email at	ership Chairperson		
dolphinpoolfun@gmail.com		Initiation Fee Bond Yearly Dues	\$100.00 \$400.00 \$650.00

Submitting this application in no way guarantees acceptance into the club. Each application will be considered by the Board of Trustees, and either accepted, rejected or held for future consideration. Upon sellout of your membership, your bond will be returned as new members are accepted.