Lochearn Community Club, Inc.

Membership Application

3600 Campfield Road, P.O. Box 26622, Baltimore, MD 21207 Phone: 410-944-9604

www.lochearnpool.com

The undersigned hereby applies for membership in the Lochearn Community Club, Inc. and agrees, if accepted, to abide by all the rules, regulations and by-laws of the club.

Name of Applicant (Bondholder) _____

Home Street Address _____

City _____ State _____ ZIP Code _____

Home Phone _____ Work Phone _____ Mobile Phone _____

E-mail Address _____

List here those who are included in the Membership: **ALL MUST RESIDE IN THE SAME HOUSE**, including the spouse/significant other, children, and other dependents who meet with the Board of Directors' approval; not multiple families living in the same house.

All application information must be fully completed for each member.

NAME	RELATIONSHIP	DATE OF BIRTH
	Bondholder	
	Spouse/significant other	

Check off appropriate membership plan and category (see descriptions on Membership Info Page):

Membership Plan:

☐ **Family** ☐ **Two-Person** ☐ **Senior** ☐ **Single Senior** ☐ **Single** ☐ **End Of Season**

Membership Category:

☐ **Full** ☐ **Trial** ☐ **End of Season**

Applicant Signature:_____ Date_____

Bonds are $300.00, and can be paid $100.00 per year for three years with a Full Membership.

Make checks payable to Lochearn Community Club, Inc.

*****Membership approval pending contact from membership committee member and treasurer's verification of clearance of payment by bank.

*In accordance with the By-laws, any member of the Club may withdraw at any time; however there shall be No Refund of the Current Year's Dues.

Office Space Only

Amount Received: _____ Cash or Check #: _____

Received By: _____

Revised 05/2010