Crestline Walton Lake Company 2024 <u>New</u> Social Membership Application

Please print, complete and mail with payment to Walton Lake Co., PO Box 265, Crestline OH 44827.

First name (s)	and		
Last name:			
Address:			
City:		State:	Zip:
Email:		Phone:	
List dependent children living at home: *NOTE: Any child married -OR- age 22 years and older <u>must have their own membership.</u>			
Name:		Age:	
Name:		Age:	
I am babysitting and purchasing a membership for the following children under 10 years old:			
Name:		Age:	
Name:		Age:	
Membership Fees:			
Single or married with children	\$225.00		
Single or married, no children	\$200.00		
Senior Citizen (62 yrs min)	\$150.00		
Babysitting	\$ 35.00 per child		
By signing this application, I agree to abide by the rules and regulations of the Crestline Walton Lake			
Company. Membership is limited to members in good standing. Anyone violating the rules will forfeit			
their membership and shall be barre	ed from all privileges o	of the Crestline	e Walton Lake Company.
Signed		Date:	
Signed:		_ Date	
ma sharaha a ta ba sa sa sa t			
For Walton Lake use only:			
Date Paid:	Amount:	Ch	eck #
Membership #:			