**TREEHAVEN SWIM CLUB**

**NEW Family Membership Application**

**Membership Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SPRING SPECIALS:**

**$350** by **APRIL 30th**

**$400** by **MAY 31st**

**$550** **JUNE 1st** or later (Normal New Membership price)

**No cash payments accepted. Please Make check payable to: “Treehaven Swimming Club”**

Amount Paid**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Check #: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Recv’d by: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Treehaven Swimming Club**

**P.O. BOX 1133**

**Aliquippa, PA 15001**

Sponsoring Member Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Please write all **members living with you in your household.**
* Class **A** Member - Voting Member. **B** member - Spouse. **C** Members - kids or other.

|  |  |
| --- | --- |
| NAME: | Cell Phone |
| **A.** |  |
| **B.** |  |
| **C.** |  |
| **C.** |  |
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**2019 Treehaven Board of Directors**