HCSRC HOUSEHOLD MEMBERSHIP FORM

This form allows us to have an accurate record of your household. You only need to submit this form if there are changes to your household or if requested by the Membership Manager. Please fill out all applicable form fields as completely as possible. If you are filling the form out by hand, please print clearly. Please save a copy of this form to your computer for your reference.

Please list ALL household members <u>currently residing at the address provided</u>. If you have paid for a Guardian Pass, please also list their information in the table below and note "Guardian" in the Relationship tab. Please see the current PDFs of the By-Laws and Pool & Tennis Rules, that can be found under the Membership tab located on the HCSRC website hunterscreekpool.com, for further details.

Membership Number		
Full Name Including Membership Owner	Birth Date (00/00/00)	Relationship to Membership Owner
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
Address		
City/Town	State	Zip
Primary Phone Number		
Emergency Phone Number		
Email Address		
Email Address		
Please return the completed form to	o the Membership Manager via e es are reactivated for the current	

PO Box 197, Herndon, VA 20172 | membership.hcsrc@gmail.com

If you chose to mail this form in to the PO Box, it will delay the reactivation of your cards.