



Application and Agreement of Membership

5820 112th Street SW • Lakewood, WA 98499 • 253-582-6311

I hereby apply for membership in the Lakewood Racquet and Sport Club. Attached is my check for \$_____, which I understand will be held until my membership is accepted, or, if rejected will be returned to me forthwith. I understand that acceptance or rejection is at the discretion of the Board of Directors and that their decision is final. I understand the initiation fee is charged for the privilege and fellowship of belonging to the club. **I have read and fully understand and agree to the conditions of membership.**

Signature of Applicant

Signature of Spouse

Date (mm/dd/yyyy)

Date Accepted

Signature of Club Official

Signature of Parent (for under 18 applicant)

Check Plan:

(Senior: 35+ • Junior: Under 35)

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Tennis Senior Family | <input type="checkbox"/> Tennis Junior Family | <input type="checkbox"/> Racquetball Family | <input type="checkbox"/> Fitness Single |
| <input type="checkbox"/> Tennis Senior Single | <input type="checkbox"/> Tennis Junior Single | <input type="checkbox"/> Racquetball Single | <input type="checkbox"/> Fitness Double |
| <input type="checkbox"/> Tennis Student (under 18) | <input type="checkbox"/> Tennis Non-Resident | <input type="checkbox"/> Pickleball Single | <input type="checkbox"/> Pickleball Double |
| <input type="checkbox"/> Social Individual | | | |

Locker (+\$3 per locker per month): ____ (qty)

Military: Active Duty (no I.F.) Retired/Reservist (half off I.F.)

PRIMARY		
Name (First & Last):		
Birth Date (mm/dd/yyyy):	Home Phone:	Cell Phone:
Email Address:		Tennis/Pickleball Level:
Street Address:		
City:	State:	Zip:
SPOUSE		
Spouse Name (First & Last):		
Birth Date (mm/dd/yyyy):	Home Phone:	Cell Phone:
Email Address:		Tennis/Pickleball Level:
CHILDREN (AGE 23 AND UNDER LIVING AT HOME)		
Children's Names (First & Last):		Birth Date (mm/dd/yyyy):

OTHERPrevious LRC Membership: Yes No

Membership Referred By:

How You Heard About Us (Member, Mail, Drive-by, Social Media, School, etc.):

BANK

Bank Name:

Routing #:

Name on Account:

Checking Savings

Account #:

CREDIT CARD**(AMEX NOT ACCEPTED)**

Please note there is a 3.5% convenience fee for all card transactions

Card Number:

Expiration:

Security Code:

Card Type:

Signature of Applicant

Date (mm/dd/yyyy)**Conditions of Cub Membership:**

1. I agree to pay the monthly dues amount stated above on or before the 28th day of each calendar month. I agree to make these payments regardless of the frequency that I use the club.
2. Use of some club facilities requires payment of additional fees. Those fees include, but are not limited to guest fees, lesson fees, special programs, and lockers. There is no outdoor tennis or racquetball court usage fee.
3. Monthly dues payments not paid by the 60th day after the calendar month for which the payment is due will result in a \$10.00 late fee for that calendar month. Nonpayment of dues may also result in revocation of the right to use the club facilities or cancellation of membership by club management in which case the initiation fee and prior month's dues are not refundable.
4. Conduct by a member which is in violation of club policies or is determined by the club Board of Directors to be detrimental to the use and enjoyment of the club by other members may result in suspension of privileges or cancellation of membership. Cancellation of membership by the Board of Directors shall release the member from further obligation to pay dues but shall not result in a refund of membership fees or prior month's dues.
5. Member expressly agrees that they will assume full responsibility for any and all injuries which might occur to member while on the premises of the club and that the club shall have no liability to member for such injuries (except those that may result from gross negligence on the part of the club) including, but without limitation, any claims for personal injuries or property damage resulting from or arising out of the ordinary negligence of the club towards member. Member agrees that he will indemnify the club for any and all amounts which the club shall play to any and all third parties as a result of a claim or claims being asserted against the club by reason of the negligence of a member toward such third party while on the premises of the club.
6. I agree that if the club must initiate proceedings to collect any unpaid portion of this agreement that I will reimburse club for attorney's fees and other costs associated with collecting amounts owed to club.
7. RENEWAL OF MEMBERSHIP:
THIS AGREEMENT SHALL AUTOMATICALLY RENEW EACH MONTH UNLESS I GIVE THE CLUB 30 DAYS WRITTEN NOTICE.
8. I understand that with card there is a 3.5% convenience fee (this fee is subject to change any time at the discretion of the club)
9. I have read the bylaws, code of conduct, and anti-harassment policy and I agree to all terms.
10. I have read the terms and conditions set forth in this agreement and by my signature below hereby apply for a membership as checked above

Signature of Applicant

Date (mm/dd/yyyy)