## Treeview Swim Club \* 301 Gresel Street - Hayward CA 94544 510-431-3400

Ownership #\_\_\_\_\_



Primary Owner :	Phone :							
Email Address :								
Mailing Address :	City	CA/ Zip						
RETURNING CLUB OWNERS:								
\$175	\$175.00 per person <b>annual dues</b>							
Primary owner must be at least 18 years of age to purchase a Club Ownership.  *** Please provide complete information for each member ***  Maximum of 6 persons per membership number, current member prices listed to left								
1.)\$175.00 Primary Owner Name:		CA DL _						
Age: Birth date:Relation	ship to Owner :	_ Male/Female	I D CARD: Y / N					
2.) \$350.00 Member Name:		_ Email						
Age: Birth date:Relation	ship to Owner :	_ Male/Female	I D CARD: Y / N					
3.) \$525.00 Member Name:		_ Email						
Age: Birth date:Relation	ship to Owner :	_ Male/Female	I D CARD: Y / N					
4.) \$700.00 Member Name:		Email						
Age: Birth date:Relation	ship to Owner :	_ Male/Female	I D CARD: Y / N					
5.) \$875.00 Member Name:		Email						
Age: Birth date:Relation	ship to Owner :	_ Male/Female	I D CARD: Y / N					
6.) \$1050.00 Member Name:		Email						
Age: Birth date:Relation	ship to Owner :	_ Male/Female	I D CARD: Y / N					

<sup>\*\*\*</sup> Emergency Contacts; Names and Phone Numbers. (Two Persons over 18, not listed on this form)\*\*\*

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1					
2					
Please re	ead and sign:				
who already this form ar	y have an ID card. Memb	ers that need a nev the first and last n	v TVSC ID card ame, and owner	ion stickers will be issues to those n should submit a small head shot pho ship number on the back of all photo	oto with
that only th accordance application,	ose named on this form, a with the By laws, and Ru	along with our gues lles and Regulation	ts, are entitled to s, and agree to	m is complete and accurate. I underso the use of the club's facilities in be bound by them. I understand that ations shall constitute a contract bet	t this
shall assunuse or occupermission and/or their viruses, or occupancy.	ne all risks for loss, dama upancy of the TVSC swim to use the TVSC swimmin employees free and harm damages, and/or injuries to the applicant further agr	ge, liability, injury, oming pool & facility ng pool & facility, haless from any loss to persons, and prorees to be personal	cost or expense  7. The applicant 10. she and/or th 11. claims, liability 12. perty that in any 13. ly responsible for	that he or she and/or the organizate that may occur during or as a result further agrees that in consideration of the organization will save and hold TV. A. communicable diseases, illnesses way my be caused by the applicants or any damage sustained to the ground of the TVSC swimming pool & facility.	of their of SC , s use or nds,
OWNER'S	PRINTED NAME:			Date:	
OWNER'S	SIGNATURE :			Please include a copy of your CA Driver	's Lic.
FOR OFFICE	E USE ONLY:				
	Total amount due:	Adults:	Children 3-17: _	Under Age 3:	
Data:	AMOUNT DAID:	CASH / CHECK	CHECK#	DEC DV	