



Membership Application

1935 Rockdale Cir, Snellville, GA 30078
(404) 789-4224

Thank you for considering **Brookeside Swim and Tennis** for you and your family's enjoyment. Please read the Rules and Regulations thoroughly before completing this application; and submit it to the Board for review.

Upon "notification of acceptance", please remit the \$300 annual dues within the week via:

☐ CashApp (\$Brookeside1) | ☐ Money Order | ☐ Check | ☐ Money Orders/Checks

* Money Order & checks must be made payable to: 'Brookeside Swim & Tennis'

[There is a \$35 fee for returned checks]

I. Primary Applicant Information:

First Name:		Last Name:	
Your Address: [Complete Address]			
Primary Phone #:		<input type="checkbox"/> Mobile <input type="checkbox"/> Landline	
Secondary Phone #:		<input type="checkbox"/> Mobile <input type="checkbox"/> Landline	
Your Email Address:		<input type="checkbox"/> Personal <input type="checkbox"/> Work	

II. Family Members Information:

[For your safety, please provide names & ages of family members expected to utilize the club.]

First Name	Last Name	Age
1.		
2.		
3.		
4.		

III. Emergency Contact Information:

[In case of emergency, provide an emergency contact.]

First Name:		Last Name:	
Relationship [to the Primary Member]:			
Address: [Complete Address]			
Emergency Phone #:		<input type="checkbox"/> Mobile <input type="checkbox"/> Landline	
Email Address:		<input type="checkbox"/> Personal <input type="checkbox"/> Work	

IV. Logistics:

Brookeside Swim & Tennis is available for MEMBERS ONLY. The annual dues are **\$300 per family/household**. The pool is "S-A-Y-O-R" (swim-at-your-own-risk).

This is a "members-maintained" environment. Members/households VOLUNTEER to help maintain the pool, tennis courts and surrounding grounds.

It is expected that ALL members must sign up to help keep the grounds and clubhouse clean for 1 week of the Summer Session (**Memorial Weekend to Labor Day Weekend**), as there is no professional housecleaning or landscaping so we can keep our dues low. This is OUR/YOUR responsibility as a member.

This usually amounts to coming out at least 1 time (between Memorial Weekend and Labor Day Weekend) to spend approximately 30 minutes or so to assist in tidying up, prep for opening or closing for the season.

- ☐ I am willing to actively participate/help/assist at least once during each Summer Session.
- ☐ I acknowledge that I have read and received a copy of the ***Brookeside Swim and Tennis: Rules and Regulations*** document.

Applicant (FName / LName) – Print Above

Board Member (FName / LName) – Print Above

Applicant (FName / LName) – Signature Above

Board Member (FName / LName) – Signature Above

Date

Date

V. Application Status:

Status		Status Date	Board Member
Step 1	<input type="checkbox"/> Reviewed	___/___/___	_____
Step 2	<input type="checkbox"/> Interviewed	___/___/___	_____
Step 3	<input type="checkbox"/> Accepted	___/___/___	_____
Step 4	<input type="checkbox"/> Notify Applicant	___/___/___	_____
Step 5	<input type="checkbox"/> Payment Received	___/___/___	_____
Step 6	<input type="checkbox"/> Key/FOB Provided [Additional Key/FOB: \$10]	___/___/___	_____
Step 7	<input type="checkbox"/> Denied/Withdrawn Reason:	___/___/___ _____	_____

VI. Volunteer History:

Member/Household	Date	Activity

VII. Violation History:

Member/Household	Date	Activity
		<input type="checkbox"/> Warning <input type="checkbox"/> Temp. Restriction <input type="checkbox"/> Membership Revoked
Violation Detail:		

Member/Household	Date	Activity
		<input type="checkbox"/> Warning <input type="checkbox"/> Temp. Restriction <input type="checkbox"/> Membership Revoked
Violation Detail:		

Member/Household	Date	Activity
		<input type="checkbox"/> Warning <input type="checkbox"/> Temp. Restriction <input type="checkbox"/> Membership Revoked
Violation Detail:		

Member/Household	Date	Activity
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