2018 Membership Application

Single Rate \$350

Eddington Swim Club 2476 Knights Rd Bensalem PA, 19020

Family Rate: \$650

Email: eddingtonswim@gmail.com
Website: eddingtonswim@gmail.com

Applicant Information						
	Membership Type Family / Single		9	Date:		
Name:						
Address:						
City	State:		ZIP Code.			
Telephone:	Cell Phone:		Email Address:			
Members of Immediate Family (Living in the same household ONLY)						
		Rela	ations	ship	Age	
1:						
2.						
3:						
4:						
5:						

Required for All Applicants

I hereby apply for membership at Eddington Swim Club. If this membership application is accepted, I agree to comply with and be bound by the Club's Rules and Regulations as they may be amended from time-to-time. I understand and agree that if the Club does not accept this application, all funds paid for the membership will be promptly refunded, and this application will be cancelled and will not be binding on either party. The Club reserves the right to decline this membership application at any time in its sole discretion. Eddington Swim Club is a Non-Profit and not liable to lawsuits by Members.

Signature:	Date: