Pearl River Nauraushaun Swim Club, Inc.

MEMBERSHIP APPLICATION

www.pearlriverswimclub.com
PO Box 42, Pearl River, NY 10965
Revised Feb, 2010

Name:	Phone:	Email:	
Address:	Town:	State: <u>NY</u> Zip	o:
Occupation:		Employer:	
Business Address:		Work Phone:	
Spouse Name:			
Spouse Occupation:	Table to the table	mployér:	
Business Address:		Work Phone:	
Cell Phone:	Spouse Cell	Phone:	
Children:		Date of Birth: _	//_
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Validation:

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- 1. Identification: Please provide a photocopy of a picture identification if you are applying by mail or be prepared to show a picture identification if applying in person.
- 2. Proof of Residency: Please provide two forms of proof of residency in the form of bills that include your address within the Pearl River Fire District. Examples include a tax bill, electric bill, phone bill or water bill.
- 3. Wait List Fee: \$75.00 + tax (8.375%) = \$81.28 (NY State Law requires that we pay tax because our membership is geographically restricted.)

I hereby apply for membership in the Pearl River-Nauraushaun Swim Club, Inc. I certify that I am at least 21 years of age and reside at the address shown above which is in the Pearl River Fire District. I understand that upon receipt of this signed application, proof of residency, and a check for \$81.28, my name will be placed on a list of potential members. I understand that the waiting list may exceed three years. I understand that my wait list payment is not refundable. It is my responsibility to keep the Club informed of any change in my address or phone number.

Applicant Signature		