

Ulmstead Swim Club, Inc. - Resident Membership Form 2007

Check one: Family (\$450) Empty Nester (\$340) Silver Membership (\$150)*

Family Information:

Family last name: _____

Address:

E-Mail:

Please check if swim team members

Home Phone: _____

Adult Names: _____

Children's Names: _____

Date of Birth

CHILDREN ON THE POOL PREMISES WHO ARE 10 YEARS OLD AND YOUNGER (BORN IN 1997 OR LATER) MUST BE SUPERVISED AT ALL TIMES BY A PARENT OR GUARDIAN 15 YEARS OF AGE OR OLDER.

Emergency Information:

In the event of an emergency, please contact:

Name: _____ Phone: _____ (Home)

_____ (Cell)

_____ (Work)

Name: _____ Phone: _____ (Home)

_____ (Cell)

_____ (Work)

* Limited to 18 visits, one person per visit. No bond required but you must have lived in Ulmstead for 15 years or more and have not minor children at home.

We, the undersigned Member of the Ulmstead Swim Club, have read and agree to abide by the Ulmstead Swim Club, Inc. – 2007 Operating Rules as listed in the UCI directory, website (www.ulmstead.org) and posted at the pool.

Date: _____

Date: _____

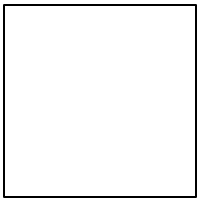
Photo Information:

Please e-mail a picture (front facing) of each person on the membership. Please identify each picture by making the file name the same as the name listed on the roster. Our e-mail address is ucipoolmembership@comcast.net

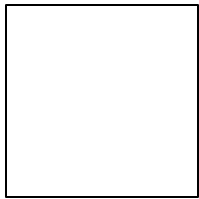
If you cannot e-mail a photo, please submit a picture (front facing) of each person on the membership. Please identify each picture by attaching it below and writing each member's first and last names on the line provided beneath each picture.

Please check one:

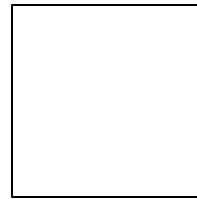
- Pictures were e-mailed to ucipoolmembership@comcast.net
 Pictures are attached



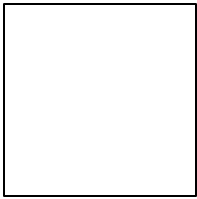
Name:



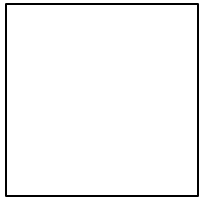
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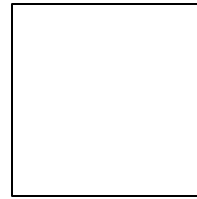
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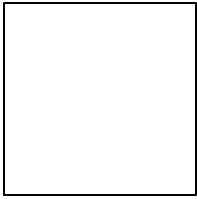
Name:



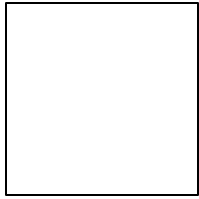
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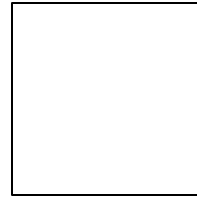
Name:



Name:



Name:



Name:

Please return forms to: Ulmstead Swim Club, Inc.
PO Box 15
Arnold, MD 21012