

Application for Membership Clinton Swim & Tennis Club

If applying before the pool is open (Memorial Day weekend), please mail application to **P.O. Box 463, Wilmington, Ohio 45177**. You will then receive a dues statement. If applying after the pool is open for the season, please fill out application and present to manager at pool.

Date: _____

Please circle one membership choice:

This application is for a: FAMILY SINGLE YOUTH SENIOR (60+)

Please mark one (Refer to pool brochure for explanation):

_____ This application is for a STOCK HOLDING membership

Name(s): _____
(as you would like it to appear on stock certificate)

_____ This application is for a NON-STOCK HOLDING membership

APPLICANT NAME(S) _____

ADDRESS _____

CITY _____ ZIP _____

TELEPHONE _____ EMAIL _____

EMPLOYER _____

NAMES OF CHILDREN

NAME: _____ AGE _____

NAME: _____ AGE _____

NAME: _____ AGE _____

For Office Use Only:

Approval: _____ Phone _____ Meeting _____ Email _____

Contact: Letter _____ Phone _____ Email _____ Date: _____

Paid stock: (date) _____ Stock issued: _____