

University City Swim Club
P.O. Box 9446, Philadelphia, PA 19139
(215) 471-POOL (-7665)

2009 Membership/Rental Form
 Dues are due April 1, 2009

Membership Name		Membership # On envelope label	
Address		Phone # H C W	
City		Phone # H C W	
Zip Code		E-mail	

RENT MY MEMBERSHIP to another family this season

Cards will be distributed only at the Club; see Financial Terms & Conditions for times.

Note: All Dates of birth for members age 21 and under MUST be filled in or no card will be issued. Use additional sheet if you have more than 7 members.

Second member is \$235 regardless of age.

	Last Name:	First Name:	Birth Date	Code ¹	Fee:
1				1	590.00
2				2	235.00
3					
4					
5					
6					
7					
	Baby Sitter Card (\$100 optional fee, good for 20 uses)				
	Bond (per your invitation letter)				
	Rental Fee (\$325 for 2009)				
	Late fees (\$25 postmarked April 2- May 17, \$100 postmarked May 18 or later)				
	2004 Credit if applicable per enclosed statement (maximum of \$100.)				()
	TOTAL DUE				
	AMOUNT PAID				
	BALANCE DUE (Installments see section below)				

¹Codes: 1 – First Member, 2 – Second Member, A – Adult Family Member, C – Child Family Member, SA – Seasonal Adult Houseguest, SC--Seasonal Child House Guest

IF PAYING BY CHECK: Make checks payable to UNIVERSITY CITY SWIM CLUB Mail to : University City Swim Club Membership, P.O. Box 9446, Philadelphia, PA 19139 <i>Returned checks will incur a fee of \$50 and cancellation of all membership cards until repayment by MONEY ORDER is received.</i>	
IF PAYING BY CREDIT CARD:	Card Type: VISA <input type="checkbox"/> MC <input type="checkbox"/>
Name (print):	Total Amount:
Card Number:	3 digits on card back:
Authorizing Signature (Required):	Expiration Date

Membership questions? Call the Membership Hotline at (215) 471-POOL (7665) or email ucsc_treasurerlhmj@verizon.net.

By virtue of paying any portion of my dues I agree to the waiver on page 2 of this form.

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INSTALLMENTS (OPTIONAL)

Must be completed by June 15, 2009.

DATE					
AMOUNT					

Please see the Schedule of Dues and Financial Terms for more details on this year's fees and payment options. If paying installments by credit card, you must contact the Treasurer to authorize each payment.

BACKUP EMERGENCY CONTACT INFORMATION

We will always attempt to contact the numbers listed on your membership first. However, as a backup, please provide the name and phone number of an additional emergency contact who is not on your family membership.

Name:	Relationship:
Phone #s:	

COMMITTEE VOLUNTEER OPPORTUNITIES

The University City Swim Club is a private, not-for-profit Club run by volunteers from amongst its members. If you would like to serve please indicate below which committee.

- Operations
 Membership
 Finance
 Improvements
 Social

WAIVER

As UCSC member, patron and/or the parent or legal guardian of Club patrons, I agree to the posted UCSC rules and further agree to hold UCSC, its Officers, Agents, and American Pool Enterprises and its subsidiaries, free and harmless from any claim or expense that may arise due to the use of the Club by myself, my dependents, guests or others residing with me.

_____ Member signature

_____ (printed name)

_____ date