

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

2010 Membership Form
 Dues are due April 1, 2010

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 \$245 regardless of age.

	Last Name:	First Name:	Birth Date	Code ¹	Fee:
1				1	590.00
2				2	245.00
3					
4					
5					
6					
7					
	Baby Sitter Card (optional fee, \$120 for 20 uses, \$70 for 10 uses)				
	Bond (per your invitation letter)				
	Installment processing fee (\$5 for each installment after 1 st)				
	Late fee (\$25 postmarked April 2- May 23, \$100 postmarked May 24, or later)				
	2004 Credit if applicable per enclosed statement.				()
	TOTAL DUE				
	AMOUNT PAID				
	BALANCE DUE (Installments - see section on back of this form)				

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

<i>IF PAYING BY CHECK:</i> 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>	
<i>IF PAYING BY CREDIT CARD:</i>	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 ucsctreasurerlhmj@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, 2010

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. Each installment beyond the initial payment incurs a \$5 processing fee.

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 Management Company 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