

**OLYMPIC VIEW SWIM CLUB**

17837 1ST AVE S, PMB 261  
NORMANDY PARK, WA 98148

**MEMBERSHIP APPLICATION**

I (we) the undersigned, hereby apply for membership in the Olympic View Swim Club. The membership fee is \$750, and the yearly dues are \$595, for a total amount of \$1345 including tax. Full payment is required with this application. This membership is transferrable.

Henceforth, annual OVSC dues will be \$595 (or as set by the OVSC membership at the Club’s annual meeting), due no later than the opening day of the pool. If paid after the opening day, an additional late fee of \$54 will be charged to the annual dues. Membership will be terminated if not paid in full by July 1st of each year. Conversely, a credit of \$53 will be issued when 4 hours of work have been completed during the annual pre-opening work party by one or more adult family members.

The membership chairperson may grant temporary Club privileges to applicants until the next monthly Board meeting following receipt of this application and accompanying funds. Non-approval of application will result in refund of all monies paid and immediate termination of temporary privileges. Approval of application confirms full membership privileges.

I(we) agree to abide by the By-Laws of this Corporation and all the rules and regulations of the Olympic View Swim Club.

APPLICANT SIGNATURE \_\_\_\_\_ SPOUSE \_\_\_\_\_

DATE \_\_\_\_\_ MEMBER # \_\_\_\_\_

**APPLICANT INFORMATION (PLEASE PRINT)**

NAME \_\_\_\_\_ SPOUSE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**OTHER FAMILY MEMBERS:**

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_