

2017 RENEWAL APPLICATION FOR MEMBERSHIP

① CONTACT INFORMATION

Family Name: Street Address: City/State/Zip:	Home Phone: Work/Cell Phone: E-mail #1: E-mail #2:
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Please clearly print any corrections or additions to your contact information below. All data will be kept confidential.

FAMILY MEMBERS

②

Please clearly print any corrections, additions, or deletions to your family members who will be using the club. Add the relationship to the primary member (Husband, Wife, Child, etc.), and verify the person's birthdate and their age as of 1/1/2017. ***If you do not have your membership key ring tag, please check the lost tag box (\$5 charge per lost tag). Newly added family members will not be charged a lost tag fee.***

Family Member	Relationship to Primary Member	Birthdate (MM/DD/YYYY)	Age as of 1/1/17		Lost Tag?
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
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A family member is considered a person living in the same household and at the same address, and legally related to the primary member. We reserve the right to request proof of relationship in order to determine any family member listed is eligible for membership as part of this family. Kenmont also allows au-pairs, nannies, or child care providers to be listed as an eligible family member provided that they are working at least 20 hours per week in this capacity. Kenmont does not discriminate on the basis of race, creed, national origin, religion, age, sex or handicap. ***Children under 3 as of 1/1/2017 are FREE from dues, but still must be listed as members on the application.***

③ INITIATION FEE

As a **Class A Lifetime Voting Member**, you have no Initiation Fee.

Complete Reverse Side →

④ ANNUAL DUES – Extended Summer Season May 27 – September 17, 2017

Please determine your family's 2017 Annual Dues based on the following criteria.

Circle the number of family members listed who are age 3 or older as of 1/1/2017.

1
\$370

2
\$480

3
\$530

4+
\$580

Add \$25 for each adult beyond two adults who is age 21 or older as of 1/1/2017.

+ \$ _____

Subtract \$25 for each adult (up to two) who is age 62 or older as of 1/1/2017.

- \$ _____

Or, if "Inactive" for 2017, just enter \$50 for Total Dues.

TOTAL DUES: \$ _____

⑤ PAYMENT INFORMATION

Please complete the following information to pay for your 2016 Membership.

from ④ **TOTAL DUES:** + \$ _____

Capital Improvement fee, \$75.00 per family (active only): + \$ 75.00

Pre-purchase Guest Passes _____ **Passes x \$5 each:** + \$ _____

If received after April 1st, Add Late fee of \$50: + \$ _____

Lost Tags? _____ **Lost Tags x \$5 each:** + \$ _____

TOTAL AMOUNT DUE: \$ _____

Enclosed is a check payable to Kenmont for the total amount due (Check # _____)

I authorize Kensington Heights Recreation Association, Inc. to charge my credit card for the actual total amount due.

VISA MasterCard

Card Number: _____ - _____ - _____ - _____

Expiration Date: _____ / _____ CCV (3-digit code on back of card): _____

⑥ IMPORTANT – ALL PRIMARY MEMBERS MUST READ AND SIGN

I hereby apply for 2017 membership at the Kenmont Swim & Tennis Club, and acknowledge that my family members and I have read and agree to abide by the Rules and Regulations, and the By-Laws of the Club (available at www.kenmont.com). I also acknowledge and agree that all members of my family and our guests will follow the directions of the lifeguards and club management at all times. **Failure to do so may result in removal from the pool or the facility, or suspension or loss of membership without refund.**

Furthermore, I hereby agree to indemnify, defend, and hold harmless Kensington Heights Recreation Association, Inc. and each of its directors, officers, agents, managers, employees, volunteers, successors and assignees from and against any and all claims, demands, defense costs, liability, expense, or damages (direct and indirect) of any kind or nature arising from or in connection with my family's and/or my guest's use and/or occupancy of the facility, or arising out of any act or omission of my family and guests. **I acknowledge that if this application is received after April 1st, 2017, a \$50 late fee is required, and my membership will be designated as "INACTIVE" for the 2017 season if space is unavailable when the application is received.**

X
Signature of Primary Member

Date