

HAMPTON GREEN SWIM CLUB

P.O. BOX 2546

MATTHEWS, NC 28106

704-296-8380 AFTER HOURS/OFF SEASON/ EMERGENCY

704-845-2826 MAY 11-SEPTEMBER 21, 2019

**2019 Swim Club New Member Application**

Date: \_\_\_\_\_

Referred by: \_\_\_\_\_

Paid by: CASH CHECK #: \_\_\_\_\_

Credit card payments are accepted in full payment transactions. Please contact us at [hamptongreenswimclub@gmail.com](mailto:hamptongreenswimclub@gmail.com) for details.

**\*\*One-Time \$200 Initiation Fee for all NEW MEMBERSHIPS\*\***

<b>Member Name:</b>
<b>Member Cell Phone:</b>
<b>Member Work Phone:</b>
<b>Member Home Phone:</b>
<b>Spouse:</b>
<b>Spouse Cell Phone:</b>
<b>Spouse Work Phone:</b>
<b>Neighborhood:</b>
<b>Address:</b>
<b>Emergency Contact &amp; Phone Number:</b>
<b>Email(s): (This information is used only for swim club news and updates)</b> 1.  2.

**Children/Dependents Names**

Child #	NAME	M/F	DOB	AGE
1				
2				
3				
4				
5				

\*\*Please remember, children under the age of 13 must be accompanied by a caregiver at the pool. All children 13-14 must pass a swim test administered by a staff member, to attend the pool alone. \*\* (See Rule #2 in Rules and Regulations)

**Waiver & Photo Release**

The undersigned, being the parent or guardian of the children, hereby consent to the aforesaid child's use of the Hampton Green Swim Club swimming pool with or without adult supervision. The undersigned parent or guardian hereby releases the Hampton Green Swim Club Association from all liability, damage, loss, personal injury, or accidental death resulting directly or indirectly from aforesaid child's use of the swimming pool with or without supervision. Further, the undersigned agrees to protect, defend, indemnify, and hold harmless the Association from all liability, loss, damage, claims, demands, costs, or judgments arising directly or indirectly from the Association's allowing the aforesaid child to use the Association's pool.

**Waiver**

In witness, the undersigned parent or guardian has executed the agreement, this \_\_\_\_\_ day of \_\_\_\_\_, 2019.

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

**Photo Release**

Please Check One: \_\_\_\_\_ I do, \_\_\_\_\_ I do not, hereby grant to Hampton Green Swim Club the unlimited right to use and/or reproduce photographs or likenesses of my family in any legal manner and for the internal or external promotional and informational activities of Hampton Green Swim Club. I also agree to allow my child's or family member's photograph to be published on the Hampton Green Swim Club internet/web pages. I further understand that by signing this release, I waive all present, or future compensation rights to the use of the above stated material(s). Photo Release In witness, the undersigned parent or guardian has executed the agreement, this \_\_\_\_\_

day of \_\_\_\_\_, 2019.

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

HAMPTON GREEN SWIM CLUB

P.O. BOX 2546

MATTHEWS, NC 28106

704-296-8380 AFTER HOURS/OFF SEASON/ EMERGENCY

704-845-2826 MAY 26-SEPTEMBER 3, 2018

**2019 Swim Club Rates**

**Early Bird w/Payment Option**

Payment options are only available for Early Bird Payments. You may choose to pay in full (see below).

Please submit by 4/15/19 or be subject to the Full Member Payment. If you choose the payment plan, please submit payment(s) in accordance to the table. You may choose to pay online via the email link sent via HGSC QuickBooks. Please email us for details. Please take note of the \$200 New Member Fee that is due on the first payment.

<i>Membership Categories</i>	<i>Rate</i>	<i>12/15/18</i>	<i>1/15/19</i>	<i>2/15/19</i>	<i>3/15/19</i>	<i>4/15/19</i>
<b>Family Membership</b> *Adult(s) with dependents	<b>\$500</b>	\$100	\$100	\$100	\$100	\$100
<b>Couple</b> *Two adults w/ no dependents	<b>\$400</b>	\$80	\$80	\$80	\$80	\$80
<b>Individual</b> *One adult w/ no dependents	<b>\$315</b>	\$63	\$63	\$63	\$63	\$63
<b>Senior Couple</b> *Couple over the age of 55	<b>\$370</b>	\$74	\$74	\$74	\$74	\$74
<b>Senior Individual</b> *Individual over the age of 55	<b>\$285</b>	\$57	\$57	\$57	\$57	\$57

**Full Membership Rates**

**After 4/15/19**

<b>Membership Categories</b>	<b>Rate</b>
<b>Family Membership</b> *Adult(s) with dependents	<b>\$525</b>
<b>Couple</b> *Two adults w/ no dependents	<b>\$425</b>
<b>Individual</b> *One adult w/ no dependents	<b>\$335</b>
<b>Senior Couple</b> *Couple over the age of 55	<b>\$395</b>
<b>Senior Individual</b> *Individual over the age of 55	<b>\$310</b>

**Caretaker/Nanny Policy:** Hampton Green Swim Club welcomes families who choose this option for their children. The Caretaker/Nanny option is used in place of guest fees when the adult members are

**not present. If the Caretaker/Nanny accompanies the member, normal guest fees will apply. Fee: \$50. Please advise if you will be using this option.**

**PAYMENT COUPONS:**

Please use a coupon with every payment you make. Full payment due by April 15, 2019. Make check payable to: Hampton Green Swim Club P.O. Box 2546 Matthews, NC 28106

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PAYMENT # \_\_\_\_\_

Name: \_\_\_\_\_

Membership Category: \_\_\_\_\_

Amount paid and date: \_\_\_\_\_

**(Please include initiation fee/Nanny Fee in first payment)**

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PAYMENT # \_\_\_\_\_

Name: \_\_\_\_\_

Membership Category: \_\_\_\_\_

Amount paid and date: \_\_\_\_\_

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PAYMENT # \_\_\_\_\_

Name: \_\_\_\_\_

Membership Category: \_\_\_\_\_

Amount paid and date: \_\_\_\_\_

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PAYMENT # \_\_\_\_\_

Name: \_\_\_\_\_

Membership Category: \_\_\_\_\_

Amount paid and date: \_\_\_\_\_

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