



Prince George's Community Pool • 3301 Buchanan Street • Mt. Rainier, MD
301-277-8896 • pgpool.org

- New Member
OR
 Renewing Member (has below information changed: No Yes, please indicate below)

First Name: _____ Last Name/Household Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ E-mail Address(es): _____

E-mail Address(es): _____

Please add me to the list serv: _____

Please list names, birthdates and contact phone numbers (if relevant) of individuals included in your membership:

Name of Household (including the person filling out this form)	Birthdate (children only)	Other Phone Numbers (work, cell)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

	BY APRIL 1	AFTER APRIL 1	+ CO-OP FEE
<input type="checkbox"/> Membership A —Two adults with dependent children (under age 18) — sharing permanent year-round residence	\$450	\$475	\$100
<input type="checkbox"/> Membership B —One adult with dependent children— sharing permanent year-round residence	\$385	\$410	\$100
<input type="checkbox"/> Membership C —Two adults without dependent children or with dependent children under age 2—sharing permanent year-round residence	\$385	\$410	\$100
<input type="checkbox"/> Membership D —Three or more adults, with or without dependent children under the age of 18—sharing permanent year-round residence. (Former Group House Category)	\$450	\$475	\$100 (2 adults) + addt'l adults @ \$100 each
<input type="checkbox"/> Membership E —Individual adult	\$245	\$270	\$100
<input type="checkbox"/> Membership F —Senior adult (age 60 by 5/23/09)	\$170	\$195	\$50
<input type="checkbox"/> Membership G —Two senior adults (both over age 60)— sharing permanent year-round residence	\$245	\$270	\$50
Total amount due and enclosed (membership fee + co-op fee) You must include co-op fee.	\$ _____		(\$25 fee for returned checks)

All ages as of 5/23/09

- I/We DO plan to complete all co-op hours and reclaim the co-op fee.
 I/We DO NOT plan to complete all co-op hours and reclaim the co-op fee.

Membership Agreement: As a member of the Prince George's Community Pool, I have read, understood and agree to abide by the rules and membership guidelines as approved by the Board of Directors. I am aware that this membership is non-refundable and non-transferrable and that it is based upon the statements contained in this application. Dues cover use of the pool and grounds for the 2009 season. I understand that membership dues are not refundable in whole or in part. I have included the co-op fee for all individuals listed on this application. If I/we complete the required number of co-op hours before October 31, 2009, I/we may request a full refund of my/our co-op fee. All requests for co-op refunds must be made, in writing, by November 15, 2009. No late refund requests will be honored. No membership will be processed without full co-op fee included.

Signed: _____ Date: _____

04/09

Please complete and return this form with your check to the gate guard or mail to: Prince George's Community Pool, P.O. Box 181, Mt. Rainier, MD 20712.

2009 MEMBERSHIP APPLICATION

MEMBERSHIP CATEGORIES & FEES