## 2018 PERMANENT MEMBERSHIP APPLICATION Highlands Swim and Tennis Club, Inc.

c/o Mary Tenney, Membership Records Manager, 1901 Torregrossa Court, McLean VA 22101 • 703-893-6860 -- mary.tenney@gmail.com

I hereby apply for a Permanent membership at Highlands Swim and Tennis Club. I understand that family memberships include full membership privileges and full use of all club facilities for my immediate family, including and limited to family members **living in my household**: husband and/or wife, unmarried children, grandparents, and live-in domestics. (*Not eligible: nieces, nephews, cousins, friends, or grandchildren visiting for the summer. Guest tickets may be purchased for these individuals.*) Permanent membership fees for the 2018 season are as follows and are subject to change for the 2019 season.

## Family Membership:

Bond Payment: \$600. (Refundable)\*

Initiation Fee: \$1250.

Construction Assessment: \$175.

Annual Dues: \$875. **TOTAL: \$2,900.** 

## Individual Membership:

Bond Payment: \$450. (Refundable)\*

Initiation Fee: \$500.

Construction Assessment: \$175.

Annual Dues: \$525. **TOTAL: \$1,650.** 

Please enclose a check for \$50 (made payable to Highlands Swim and Tennis Club) to cover your application fee for the 2018 season. Please do not enclose your dues payment with this application.

I understand that the \$50 application fee makes me eligible for the membership requested, is *non-refundable*, and covers my application for the 2018 season and the subsequent season. If there is a waiting list for 2018 membership at the time you receive my application, my application will be placed on the Highlands Waiting List in the order in which it is received (by postmark date).

There are certain inherent risks involved in participating in swimming and tennis programs and I agree that all children included in my membership age 10 and older must have emergency information on file at the front desk. Highlands Swim and Tennis Club, its employees, and volunteers are not in a position to be responsible for any unforeseeable or uncontrollable hazards that may result in injury or death, and/or damage to personal property.

Signature of applicant:	Date:	
below.		lands of any changes in the information listed
	Spouse's full name:	
	Spouse's occupation:	
Mobile phone:	Mobile phone:	
	(Optional): Referred by Highlands Member:	
Home Address:	····	
City:	State:	Zip (+4)
E-mail address (for updates and notific	cation): Please print clearly:	
Please list children and birth	dates:	
1. Name:	Birth date: / / 4. Name	e: Birth date: / /
2. Name:		
3 Name	Birth date: / / 6 Name	

<sup>\*</sup> Bond Value is refundable upon the future sale of my membership.