Clemmons West Recreation Association (CWRA) 2024 Membership Application

Payment and Application Info:

Please mail completed application to:

CWRA PO BOX 232 Clemmons, NC 27012

Checks should be made payable to CWRA and mailed in with your application.

Payment can also be made online at https://cwramembership.square.site.

NOTE: A printed family photo (NOT DIGITAL) is required. This will be kept at the check-in desk and will be used to grant entry into the pool.

Questions?

Please contact the CWRA Board by emailing cwramembers@ gmail. com.

Contact Information

Last Name:		First Name:	
Additional family members (NOTE defined as the applicant, their spouse, an stepchild, or foster child under the age of dependent at any age if they are disabled	d their dependen 19, or under the	t children. Depende	
Name Age (i	if under 18)	Name	Age (if under 18)
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Street Address:			
			7:
City:	•	State:	Zip:
Email(s): (This will be used to com	municate imp	oortant info)	
Home phone:Cell	phone:		
Emergency contact phone:			
By signing below, I attest that I have read the Pool Policies & Rules listed on the CWRA website and			
agree to follow them along with my family and all guests.			
	•	J	
Signature (required):			
N	lembers	hip Selecti	ion
New Member? Yes	No **New member discount of \$25 off for anyone joining the pool for the first time!		
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Please circle one membership opti	on below:		
Membership	Early Bird	Rate	Prices after 4/15
Senior Membership	\$275		\$300
(Two people, 65 years or older)			
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Single Membership	\$290		\$315
Two-person Membership	\$350		\$375
Family Membership	\$450		\$475
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Swim Team Only Membership	\$200		\$225

We have a swim team and we'd love to have your child swim with us this summer! For more information, please email cwaquademons@gmail.com or check out our swim team page on the CWRA website at www.thecwra.com.