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://cwramembers hip.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: This is for immediate family members living at the same address. A "family" is defined as the applicant, their spouse, and their dependent children. Dependent children are an applicant's child, stepchild, or foster child under the age of 19, or under the age of 24 if a full-time student. A child may also qualify as dependent at any age if they are disabled.):s):

Name	Age (if under 18)	Name	Age (if under 18)

Street Address:		
City:	State	te: Zip:
Email(s): (This will be	used to communicate importa	tant info)
Home phone:	Cell phone:	
Emergency contact pho	one:	
	st that I have read the <u>Pool Po</u> ong with my family and all gu	olicies & Rules listed on the CWRA website and uests.
Signature (required): _		

Membership Selection

New Member? Yes If not a new member, first year you joined the pool:

Please circle one membership option below:

Membership	*\$25 off for new members
Senior Membership	\$300
(Two people, 65 years or older)	
Single Membership	\$315
Two person Membership	\$375
Family Membership	\$475
Swim Team Only Membership	\$225

No

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.