

VIENNA WOODS SWIM & TENNIS CLUB

Owned and operated by Community Ventures, Inc.

P.O. Box 33, Vienna VA 22183

Phone/Fax: 703-938-0005 www.viennawoods.org

2018 DUES STATEMENT AND RENTAL PERMISSION FORM

Can't decide yet on renting? Pay your dues now and we will refund them if you decide later to rent.

<b>DUES: \$525</b>	<b>AVOID LATE FEE-PAY BY MARCH 5</b>
Name: _____	SHARE # _____
Address: _____	PHONE NUMBER: _____
City, State, Zip: _____	TENNIS KEY NUMBER: _____

- All members: please correct information above if there are any errors or changes.
- If paying dues, complete appropriate items below. Make check for **\$525** payable to Community Ventures, Inc. If postmarked *after March 5* pay **\$575**. If postmarked *after April 15* pay **\$600**. **Late fees strictly enforced.**
- A photo is only required if you did not email a photo last year. Please name the photo using your last name and share number and email to [gwomack@viennawoods.org](mailto:gwomack@viennawoods.org) if you do not have a recent photo on file.
- Mail in one envelope the Dues Statement, yellow medical form, proxy card and payment.

**RENTAL PERMISSION: PLEASE RENT MY MEMBERSHIP FOR 2018.** \_\_\_\_ Check here, enclose \$75 rental fee and sign form at bottom. Mail to P.O. Box 33, Vienna VA 22183. **Late fees apply (\$125 to rent share after March 5<sup>th</sup> and \$150 to rent share after April 15<sup>th</sup>).**

**EMERGENCY PHONE:** \_\_\_\_\_ (other than home phone - required by Fairfax County)

**CHILDREN LIVING IN HOUSEHOLD WITH YOU:** (In-laws and grandchildren are not included)

NAME	DAUGHTER/SON	BIRTH DATE

<b>CHILD CARE PROVIDER WHO WILL BRING CHILD TO POOL IN YOUR ABSENCE</b>	<b>SEND PHOTO OF PERSON LISTED IF NOT PREVIOUSLY SUBMITTED</b>
NAME: _____	BIRTH DATE: _____

Please note above any health condition of which the staff should be aware. IMPORTANT: If any child listed above is under the age of 18 years, you must complete the Emergency Medical Authorization form (yellow). If you fail to do so you will not be allowed to leave your child/children unattended at the pool.

**CERTIFICATION: I CERTIFY THAT THE ABOVE IS AN ACCURATE STATEMENT OF THE DUES OWING TO VIENNA WOODS SWIM & TENNIS CLUB FOR 2018 AND THAT ALL PERSONS LISTED ARE PERMANENT MEMBERS OF MY HOUSEHOLD. I HAVE READ AND UNDERSTAND THE RULES AND REGULATIONS GIVEN TO ME WHEN I PURCHASED MY MEMBERSHIP. (Rules and regulations available on the club web page.)**

**SIGNED** \_\_\_\_\_ (Signature required for either dues or renting)

**EMAIL ADDRESS:** \_\_\_\_\_