2017 Payment Pla Application for Candlewood Swim C		Payment Rec.	Check Number	Check Amount	Date Received
	.100				
Please check one of the following:					
Family ( <b>\$695.00</b> )			Office	Use Only	
Couple Membership / Parent and	d Child ( <b>\$580.00</b> )			<u> </u>	
Senior Citizen Couple ( <b>\$495.00</b> )	)	5	R		
Individual Membership ( <b>\$495.0</b>	0)	R			
Swim Team Only ( <b>\$225.00</b> ) Th	is price is the same a	ll year			
Please Print Name:	(in)	AT I			
Street Address:	à à	2,			
City, State, Zip Code:	10° 19				
Home Tel Emerg	ency Tel.				
Email Address	100				
Names of Dependent Children in residence with	h you under 21:				
1	date of birth				
2	date of birth				
3	date of birth				
4	date of birth				
5	date of birth				
The acceptance or rejection of this application is the sole prero accurate information as requested above or failure to observe c					

accurate information as requested above or failure to observe club rules is cause for rejection of membership and or dismissal from the club. Further any rude or obnoxious behavior is cause for dismissal from the club. Candlewood Swim Club as a private entity reserves the right to refuse admission to the club to anyone who does not abide by the rules or acts inappropriately at any time and no refund will be given.

I /We agree that Candlewood Swim Club LLC is a recreational facility where physical harm can occur. I/We agree to hold harmless Candlewood Swim Club and its partners in cases of personal injury.

Signature of Applicant	S	pouse:

Please return this form with check or money order payable to the Candlewood Swim Club Inc. 31 Newbury Road Howell, NJ 07731.