

SPRINGFIELD SWIM CLUB – APPLICATION FOR MEMBERSHIP

P.O. Box 307
Springfield PA 19064

SSC
2018

I/We the undersigned do hereby make application for membership in the Springfield Swim Club (SSC) Inc.

Adult 1

Adult 2

Street Address, Springfield PA 19064

Telephone

E-Mail Address (for membership and club information only)

How did you hear about us (please check one of the following):

☐ member referral, ☐ postcard,

☐ Springfield Press, ☐ other (please describe) _____

If a parent of Adult 1 or 2 is a current member of SSC, please check here ☐

Sponsors (All applicants must be sponsored by two (2) members (of different households) in good standing)

Sponsor 1

Member Number

Sponsor 2

Member Number

Deposit A Deposit of \$25.00 (check) must accompany application, Application must be delivered personally to a member of the membership committee listed below:

Noel Peranteau
319 Brock Road
610-389-3479

membership@springfieldswimclub.com

John O'Hara
408 Wayne Ave
610-604-0220

jsksohara@verizon.net

Tom Ronayne
141 Norwinden Drive
610-541-0708

tronaynesr@msn.com

RECEIPT

Springfield Swim Club Inc.
P.O. Box 307
Springfield PA 19064

Received deposit of \$25.00 from:

Name

Street Address

Subject to the following conditions:

1. This deposit will be refunded upon WRITTEN request anytime prior to being offered membership in the club.
2. When offered membership in the club, this deposit will be credited to the cost of share of stock if balance or first payment (payment plan) is paid within 30 days of notification.
3. This deposit is subject to forfeiture ONLY if you are offered membership and cannot be contacted or you fail to comply with condition 2 above.

Membership Committee Member

Date