Lochearn Community Club

Bond Redemption Request Form

Please mail a resignation letter, along with this completed form and original bond to:

Lochearn Community Club P.O. Box 26622 Lochearn, Maryland 21207

Name(s) as shown on the membership bon	d:	
Address		
Home Phone:		
Email:		
Bond Number:	_Member since:	
I am returning my bond with this form	I cannot l	ocate my bond
Reason for requesting refund: Moving out of the areaChange in lifestyle (change in income, cPrefer membership in another facilityOther:		
Bond Redemption Policy: The full amount of the face value of your bond, you when a new member is available to purchas are received. By signing below you fully acknow	less any dues or assessment se the bond. Bonds will be re	edeemed in the order in which requests
Signature		Date
For Board use only: Request received:Request acknowled Notes:		edeemed: