

CAPE ST. CLAIRE SWIM CLUB, INC. (CSCSC)

1332 Cape St. Claire Road, # 351

Annapolis, MD 21409

www.capepool.com

Membership Purchase Application

Complete all parts of the application. Attach a recommendation from a current CSCSC member and a check for \$1,300. All applications must be received by mail or drop-off to the P.O. Box no later than November 1, 6pm. Applications will only be accepted to the P.O. Box.

Part 1: APPLICANT/POTENTIAL MEMBER INFORMATION

Name(s) of Applicant(s): _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

Email Address _____ Email Address _____

I/We, the purchaser(s) of the CSCSC membership named above, hereby apply for CSCSC membership and pending approval of the CSCSC Board of Governors, will accept all rights, privileges, liabilities, obligations, and responsibilities of membership in CSCSC. I/We have read CSCSC's rules, regulations, and bylaws and will abide by them once approved for membership. I/We understand that the rules, regulations, and bylaws are available for download from the CSCSC website (www.capepool.com) and that hard copies are available on request to the CSCSC Board of Governors by email to board@capepool.com or at the address above.

Signature of Applicant

Signature of Applicant

PART 2: WRITTEN RECOMMENDATION REQUIRED

Recommendation from: _____

An applicant must submit a written recommendation from a current CSCSC member who is in good standing. The member providing the recommendation cannot be the member who previously wrote a lease recommendation for you (if applicable). Member recommendation must be attached or the application will be returned.

Part 3: ANNUAL PAYMENT INFORMATION FOR NEW BOND HOLDER Annual dues are currently \$600. Dues are billed on February 1 and full payment is required by April 1; partial payments are not accepted. If you wish to purchase a babysitter card, the cost is \$35 on or before May 1st and \$50 after May 1st. Guest passes are available for purchase at the pool.

Part 4: FAMILY MEMBER INFORMATION Entry into and use of CSCSC facilities are restricted to members or lessees, their family members and guests, Club staff, and participants at CSCSC events. Membership in the Club shall consist exclusively of family members. For CSCSC purposes, "family members" means the

head of the household, his or her spouse and children, and other dependents who reside in the home of the member(s) or lessee(s); it does not include other family members who reside at the house, friends, or neighbors. You must have a CSCSC pool pass to use CSCSC facilities. To obtain a pool pass for each family member, complete the table below. Be sure to include yourself in this form as well.

Last name	First name	DOB	Relationship to Applicant

Cape St. Claire Swim Club, Inc. (CSCSC) Exculpatory Agreement

I/we, the undersigned lessee(s), agree that all my/our activities at CSCSC and those of my/our family and guests shall be undertaken at my/our sole risk and that the CSCSC and its members shall not be liable to me/us for any claims, demands, injuries, damages, actions or causes of action whatsoever to my/our person(s), or property or that of my/our family and guests arising out of or connecting with the use of the CSCSC by me/us, my/our family and guests. Further, I/we do expressly hereby forever release and discharge CSCSC from all claims, demands, injuries, damages, actions or causes of action and from all acts of active or passive negligence on the part of CSCSC, its servants, agents, employees and owners.

Printed Name of Applicant

Printed Name of Applicant

Signature of Applicant

Signature of Applicant

FOR CAPE ST. CLAIRE SWIM CLUB USE ONLY

Recommendation received? Yes No
 Check received? Yes No Check Number _____

BOARD APPROVAL
 Membership, CSCSC: _____ Date: _____

Treasurer, CSCSC: _____ Date: _____

Secretary, CSCSC: _____ Date: _____

President, CSCSC: _____ Date: _____

Bond Number Issued/ Date: # _____ Date: _____