



Membership #: _____

NOB HILL SWIM CLUB

2007 Family Membership Application

Rolling Acres Improvement Association - Ellicott City, MD 21042 - 410-461-9120

www.nobhillswimclub.com

Please print clearly. Additional application forms are available on the website.

Adult family members - head/s of household:

Last name: _____

First name: _____

Last name: _____

First name: _____

Address: _____

Email address: _____

Home phone: _____

Work/other phone: _____

Other family members living at the above address: (Residency verification may be required)

Last name: _____ First name: _____ Age: ____ Relationship: _____

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Last name: _____ First name: _____ Age: ____ Relationship: _____

Last name: _____ First name: _____ Age: ____ Relationship: _____

Families who employ a live-in or other regular nanny/babysitter* who will frequent the pool with the family's children may either add this person on to their membership by opting for the special Nanny Membership, or the family may choose to **pay the daily guest pass fee every time the nanny visits the pool**. If you choose to take advantage of this membership option, please fill-in the Nanny Membership information on the membership application form and include the additional \$30 in your membership fee.

Nanny Membership Add-on:

In the event you've NOT yet finalized your summer nanny/babysitter, please check this box, include the \$30.00 fee with your application and complete this portion of the form when you visit the pool for the first time.

Nanny information:

Last name: _____

First name: _____

Age: ____

* If the family nanny/babysitter is already a member of Nob Hill Swim Club, the Add-on fee is not required, however, please provide their information above so we may verify their membership.

