



NOB HILL SWIM CLUB

2009 **NEW** Family Membership Application

Rolling Acres Improvement Association – P.O. Box 422

Ellicott City, MD 21041 - 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: _____

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.

Swim Lesson Registration:

Swim lesson registration information is available on the website. If interested, please complete the Swim Lesson Registration Form separately and submit it with separate payment.



Application Summary

Complete the application summary section to calculate your application total

2009 Pool Membership registration fee \$ _____

Nanny membership add-on (optional) \$ _____

Total \$ _____

PLEASE DO NOT INCLUDE SWIM LESSON FEES WITH YOUR MEMBERSHIP FEES. SEPARATE CHECKS ARE REQUIRED. COMBINING THESE PAYMENTS WILL DELAY THE PROCESSING OF YOUR MEMBERSHIP APPLICATION.

My signature below acknowledges that I have read and understand the Nob Hill Swim Club rules, and agree by the submission of my membership/lesson fees to abide by them (rules available on the website).

On occasion Nob Hill Swim Club (RAIA) takes photographs and/or video of the pool and surrounding property while members are present. These photos and video segments are used strictly for promotional purposes in print and on the web. By signing the application form you authorize Nob Hill Swim Club (RAIA) to use photos/video of you and your family members for this purpose. If you have questions or concerns about this policy please contact the RAIA Board of Directors in writing at info@nobhillswimclub.com.

Signature

Date

Please make **ALL** checks payable to **Rolling Acres Improvement Association**. Your canceled check is your receipt. There is a returned check fee of \$35.00 for all returned checks.

For office use only: **Check received:** _____, **2009 Check No.:** _____ **Amount: \$** _____