Brookhaven Swim Club

PO Box 1011, Brookhaven, PA 19015

610-872-9085

2026 AUGUST MEMBERSHIP APPLICATION

AS PROVIDED IN THE BY-LAWS OF BROOKHAVEN SWIM CLUB, ENROLLMENT IN <u>MANDATORY</u> FOR BOTH SPOUSES, AND ALL CHILDREN THAT HAVE NOT ATTAINED THE AGE OF 18 YEARS BY MAY 1ST OF THE CURRENT OPERATING SEASON.

Name_____ **Telephone No.**_____

Address_____

Email Address_____ **Name of Spouse**_____

Name of Child	Age	Birth Date	Name of Child	Age	Birth Date

Associate Member Name _____ Babysitter Name _____

This application is subject to approval by the Membership Committee and the Board of Governors. The right to refuse application is reserved. This application is valid for 2026 season only. Subsequent renewal is subject to approval of the Board of Governors. Signed application must be accompanied by full payment, payable to Brookhaven Swim Club.

The name & signature of three (3) ACTIVE Brookhaven Swim Club *<u>Bond</u>* members is required. **<u>One bond signature per bond family.</u>**

1._____
(Signature)
Print Name_____ ___Tel #_____

2._____

Print Name_____ Tel #_____ e)

3._____

Print Name_____ Tel #_____

APPLICATION FEE: WAIVED
(~~app fee waived if submitted before 5/1/26~~)

2026 DUES STRUCTURE
1= $178.00 / 2= $298.00 / 3= $392.00
4= $453.00 / 5= $515.00 / 6= $592.00
Baby sitting/sitter: $100.00 / Assoc: $100.00
DATE PAID_____ CHECK #_____
AMOUNTS_____

The undersigned herby submits application for an Annual membership at the Brookhaven Swim Club and agrees that, if accepted, he/she, and on behalf of all family members and guests, willingly agree to comply with the rules, regulations, and by-laws of BSC. I/We agree to practice reasonable personal responsibility and that the use of grounds and facilities will be at our own risk. I/We agree to release and hold harmless BSC, the Board of Governors, staff, members, and guests with respect to any and all injury, disability, death, loss or damage to person or property.

_____ _____

APPLICANT'S SIGNATURE SPOUSE'S SIGNATURE