

# TERRACE BROOK POOL MEMBERSHIP APPLICATION FORM

**THIS IS A "SWIM-AT-YOUR-OWN RISK" FACILITY - THERE IS NO LIFEGUARD ON DUTY. POOL USE IS AT THE SOLE RISK OF THE INDIVIDUAL USING THE POOL. A RELEASE OF LIABILITY IS REQUIRED PRIOR TO ISSUE OF A CARD KEY.**

**NAME:** \_\_\_\_\_ **DATE** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY STATE ZIP:** \_\_\_\_\_

**HOME PHONE NO.** \_\_\_\_\_ **OFFICE PHONE NO.** \_\_\_\_\_

**CELL NUMBER** \_\_\_\_\_

**IF THERE IS AN EMERGENCY PLEASE CONTACT:**

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_, **OR**

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_.

**THE FOLLOWING FAMILY MEMBERS RESIDE AT THE ABOVE ADDRESS AND ARE TO BE EXTENDED FULL MEMBERSHIP PRIVILEGES**

**MEMBER 1:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **Sex:** \_\_\_\_\_

**MEMBER 2:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **Sex:** \_\_\_\_\_

**MEMBER 3:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **Sex:** \_\_\_\_\_

**MEMBER 4:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **Sex:** \_\_\_\_\_

**MEMBER 5:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **Sex:** \_\_\_\_\_

**MEMBER 6:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **Sex:** \_\_\_\_\_

**REQUESTED BY:** \_\_\_\_\_

**Please Print Name:** \_\_\_\_\_