

Annual Membership Information and Registration update:

Member's Name _____ Cell phone # _____

Name of Spouse (for an Individual membership of a minor, please provide this information for the parent)

_____ Cell phone # _____

Home Address _____
(Street, City, Zip Code)

Home phone # _____ Home / Family e-mail address _____
(please print)

Emergency contact _____ Phone # _____
(Name)

<u>Names of children living at home*</u>	<u>Date of Birth</u>
_____	_____
_____	_____
_____	_____
_____	_____

Other permanent resident of household* _____ Relationship _____

***It is also necessary to provide proof of residency (i.e. copy of current drivers license, copy of personalized check, etc.) for ALL adult children above the age of 22 (this means any child born prior to May 1997) and/or any permanent resident other than the immediate family who resides at the membership address. If such proof is not submitted, those names will be DELETED from our membership files. This proof is to be submitted annually.**

As always, we ask that you continue to provide information such as: new addresses, new phone numbers, births or children no longer residing at your residence, anytime throughout the year.

- Please be advised, there remains a potential risk for Covid19. We have been advised by our insurance carrier that they will not honor any claims for illness or injury resulting from Covid19. Though we as a pool will follow all necessary guidelines to keep our members safe, members will assume responsible for their own families following the social distancing guidelines and will assume any risk involved with the Covid19 pandemic while using the Colony West Swim Club facility.**

Signature of Adult Member or Guardian _____ Date _____

