

WOODBINE SWIM CLUB MEMBERSHIP APPLICATION

SECTION ONE – BONDHOLDER INFORMATION

NAME: _____ DATE OF BIRTH: _____ SSN: _____

SPOUSE: _____ DATE OF BIRTH: _____

ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____

DO YOU OPT IN TO RECEIVE TEXT NOTIFICATIONS ABOUT WOODBINE SWIM CLUB: YES NO

E-MAIL ADDRESS: _____

OCCUPATION: _____ EMPLOYER: _____

SECTION TWO – HOUSEHOLD INFORMATION

ADDITIONAL HOUSEHOLD MEMBERS	RELATIONSHIP	BIRTHDATE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SECTION THREE – EMERGENCY CONTACT INFORMATION

EMERGENCY CONTACT NAME: _____ PHONE: _____

SECTION FOUR – REFERRAL INFORMATION

HOW DID YOU HEAR ABOUT WOODBINE (if referred by member, please add name)? _____

Please list the names of two current bondholders willing to sponsor your membership.

CHECK HERE IF YOU WOULD LIKE TO BE SPONSORED BY THE BOARD OF TRUSTEES.

SECTION FIVE – SIGNATURE

The undersigned applicant hereby applies for membership in the Woodbine Swim Club and agrees to the terms and conditions governing applications and membership as well as the rules, regulations, and by-laws of the club as enacted.

The undersigned also acknowledges that resignation from Woodbine must be submitted in writing on the 1st of April of the year they are requesting to resign in order to avoid dues for that season and maintain ownership of their bond.

SIGNATURE: _____ DATE: _____

OFFICE USE ONLY

_____ DATE	RECEIVED	_____ DATE	INVOICE SENT	_____ DATE	BOND CERTIFICATE #
_____ DATE	BOARD VOTE APPROVED/DISAPPROVED	_____ DATE	PAYMENT RECEIVED	_____ DATE	DATE BOND ISSUED

REV 12/2024



Woodbine Swim Club
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Pennsauken, NJ 08109
856-663-9742
membership@woodbineswimclub.com

Mail to address:
Woodbine Swim Club
PO Box 1054
Merchantville, NJ 08109