

2019 Cardinal Hill Recreation Club-Full Membership Form

Name: _____ Address: _____

City/State/Zip: _____ Phone: _____

CHRC Member Since: _____

Please list all phone numbers/emails that you would like to get notifications regarding CHRC News/Events/Pool Closings. This information will be used to conduct CHRC business only.

Email: _____ Phone: _____ Email: _____ Phone: _____

Email: _____ Phone: _____ Email: _____ Phone: _____

Yourself/Spouse/Children/Dependents Living in your Household:

Name	Date of Birth	Name	Date of Birth	Name	Date of Birth
1.		4.		7.	
2.		5.		8.	
3.		6.		9.	

Board Approved Babysitter/Nanny/Caregiver/dependent not living in your Household:

Name	Date of Birth	Relationship	Additional Fee for 2019 Season
1.			\$100.00

2019 Full Membership Rates- Please check boxes that apply

Single Adult	\$310.00	2 Adult Family	\$360.00	Family with dependent	\$430.00
Initiation Fee	\$300.00	Split up Initiation Fee (3 years)	\$100.00	Winter Maintenance Fee	\$85.00

“Full” Membership requires a \$300 Initiation Fee. Fee can be paid all at once or over a three-year period in \$100 increments.

Full Member benefits include: lower membership rates, discounted clubhouse and pool rentals, policy voting privileges, opportunity to serve on the CHRC Board. **All FEES INCLUDE TAX.**

CHRC Medical Information

Name of Doctor: _____ Phone: _____

Name of Dentist: _____ Phone: _____

Preferred Hospital: _____ Alternate Contact: _____

Child	Allergies/Other	Date of Last Tetanus

In my absence, CHRC staff is authorized to obtain emergency medical care for my child.

I authorize CHRC to use photos of Myself/Spouse/Dependent for CHRC website/social media YES NO

I have read and agree to all CHRC rules and terms.

Parent or Guardian Signature _____ Date _____

Please mail form and payment to: Make Checks Payable to: **Cardinal Hill Recreation Club** **Online Payment Accepted (Fees Apply) at:**
Cardinal Hill Recreation Club www.cardinalhillrec.org/
PO Box 340101
 Beavercreek, OH 45434