

2010 MARCH MADNESS MEMBERSHIP APPLICATION
VALID ONLY FOR MARCH 19, 20, AND 21

Name of Member: _____ Spouse or Other: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Mobile (Member): _____ Mobile (Spouse) _____

Please accept my application for the following Membership:

- Family Trial* @\$495** **Two Adult Trial* @\$450** **Single Trial* @\$395**

**Trial Memberships are only available one year.*

- Full Family @ \$995** (Dues at \$495 plus discounted Initiation Fee at \$500) or
 I choose to pay the Initiation Fee over two years and pay \$275 each year for 2 years beginning April 1, 2011.
- Full Two Adult @\$850** (Dues at \$450 plus discounted Initiation Fee at \$400) or
 I choose to pay the Initiation Fee over two years and pay \$225 each year for 2 years beginning April 1, 2011.
- Full Single @\$755** (Dues at \$395 plus discounted Initiation Fee at \$360) or
 I choose to pay the Initiation Fee over two years and pay \$205 each year for 2 years beginning April 1, 2011.

Hamilton Lakes offers a bank draft option for paying your dues and/or initiation fee over ten (10) months beginning in July and ending in April for the upcoming year. Payment plans are also available to those who wish.

Please put a check in the box indicating your expected participation in the club for each person within the household. For children, please include their date of birth.

Adult Tennis Jr. Tennis Swim Team Email Address

Member's Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Spouse's Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other's Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Child: _____ DOB: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Child: _____ DOB: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Child: _____ DOB: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Child: _____ DOB: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Please indicate your interest in serving on a committee.

	Board of Directors	Café	Infrastructure	Finance	Marketing	Pool	Social	Tennis
Member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spouse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please submit your application with your payment to: **HAMILTON LAKES POOL, INC.**
P.O. BOX 10041
GREENSBORO, N.C. 27404