



S Syracuse University
Drumlins Country Club

**SWIM CLUB ONLY
MEMBERSHIP APPLICATION**

Must be 13 & up to qualify for a "Single" swim club membership. Family membership consists of a primary member, a spouse / domestic partner, and children 21 & under living in the same household.

SINGLE (SWIM ONLY)	\$900	<input type="checkbox"/>	SINGLE (EAST MEMBER)	\$675	<input type="checkbox"/>
JOINT (SWIM ONLY)	\$1,300	<input type="checkbox"/>	JOINT (EAST MEMBER)	\$1,015	<input type="checkbox"/>
FAMILY (SWIM ONLY)	\$1,600	<input type="checkbox"/>	FAMILY (EAST MEMBER)	\$1,250	<input type="checkbox"/>
ADD BABYSITTER	\$200	<input type="checkbox"/>	ADD BABYSITTER	\$200	<input type="checkbox"/>

PRIMARY MEMBER NAME: _____

DATE OF BIRTH: _____ **GENDER:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PRIMARY PHONE: _____ **EMAIL:** _____

SECONDARY PASSHOLDER NAME (IF APPLICABLE): _____

DATE OF BIRTH: _____ **GENDER:** _____

PRIMARY PHONE: _____ **EMAIL:** _____

FAMILY MEMBER NAME(S) (IF APPLICABLE, MUST BE 21 OR UNDER IN SAME HOUSEHOLD):

NAME: _____ **DOB:** _____

NAME: _____ **DOB:** _____

NAME: _____ **DOB:** _____

NAME: _____ **DOB:** _____

BABYSITTER NAME(S) (IF APPLICABLE, MUST BE 16 OR OVER, ABOVE FEE APPLIES):

BABYSITTER NAME: _____ **AGE:** _____

This signed form indicates my application for membership in Drumlins Swim Club for the 2023 season. I understand and agree that my membership in Drumlins will renew automatically each year unless I cancel my membership in writing. I understand that Drumlins will send me a notice prior to the start of each renewal year providing me with an option to cancel my renewal membership in writing or alternatively one or more options for paying the membership fees for the renewal year. I further understand and agree that Drumlins may change the terms and conditions of membership including but not limited to these automatic renewal provisions at any time upon written notice to me of any such change. Drumlins reserves the right to suspend or cancel membership due to non-payment of account. Checks returned for any reason are subject to a \$35 fee or the maximum allowed by law. The primary member agrees to pay all reasonable collection costs if this account should be placed with an attorney or agent for collection. All membership fees are non-refundable once paid, and a member will not be entitled to a refund if his or her membership is cancelled, terminated, or altered, whether on his or her own initiative or due to closure or limited use by governmental mandate.

My signature below certifies that I have read the above policies and agree to abide by them.

SIGNATURE: _____ **DATE:** _____

TOTAL DUE: \$ _____ **CASH:** _____ **CHECK:** _____ **CREDIT CARD:** _____

OFFICE NOTES: _____