River Edge Swim Club, Inc.

P.O. Box 159
River Edge, New Jersey 07661

_____
MEMBERSHIP NO.

ANNUAL QUESTIONNAIRE

The following information is needed to make up your admission cards: (please use a ball point pen)

1. Bondholder _____ _____
(ONEPERSON ONLY) (SPOUSE'S NAME)

Home Address _____ _____
(HOME PHONE)

Email Address _____ _____
(CELL PHONE)

Occupation _____ _____
(BONDHOLDER'S) (SPOUSE'S)

Emergency Contact _____ _____
(CONTACT'S PHONE)

2. Unmarried children, under age 25 permanently residing at above address.

FULL NAME	BIRTHDAY MONTH	DAY	YEAR	RELATIONSHIP	LEAVE BLANK

3. (a) Other Adults:(Grandparents, children over 25 years of age – **NEED PROOF OF RESIDENCE**), $25.00 Charge for admission card

_____
_____
_____

(b) Other relatives permanently residing with you (**NEED PROOF OF RESIDENCE**) $50.00 Charge for admission card.

_____
_____
_____

(c) Babysitter (required to be at least 16 years of age) $75.00 Charge for admission card

_____
_____
_____

If you would be interested in serving as a Swim Club Trustee, please check here _____

_____ _____
DATE BONDHOLDER'S SIGNATURE (ONE PERSON ONLY)

Please return **both** copies of this questionnaire with your dues by April 1st. No admission cards will be mailed until this information is received.

Rev. 2006