

THE HIGHLANDS POOL
2017 MEMBERSHIP INFORMATION FORM

NAME _____

ADDRESS _____

HOME PHONE _____ WORK PHONE _____

SPOUSE'S NAME _____

EMAIL: _____

CHILDREN LIVING WITH YOU:

CHILD'S NAME _____ AGE _____

CHILD'S NAME _____ AGE _____

CHILD'S NAME _____ AGE _____

CHILD'S NAME _____ AGE _____

PAYMENT SCHEDULE

Initiation Fee: \$650.00

Membership Types:

- 1) Family Pool Membership - \$510.00
- 2) Senior Couple Pool Membership - \$345.00 - For Senior Couples Only
Senior Couple Pool Membership requires one spouse be a minimum of 55
and submit a copy of his/her photo drivers license for first time qualification.

If dues are not kept current, membership will automatically be terminated.

In order for membership to be reinstated, the \$650 initiation fee must be re-paid.

I understand the \$650 initiation fee is non-refundable and my membership is not transferable. I understand that by signing this application I agree my family, my guests and I will abide by the Pool Rules. Pool Rules and Hours are online at highlandsca.com

SIGNED _____ DATE _____

Membership information forms must be completed in their entirety and returned with the signed waiver form (if applicable). Payment is due in full by May 10, 2017. All Members must complete new forms for 2017. Please send your forms and payment payable to The Highlands, LLC to Donna Castleberry at 7319 Rosemead Lane, Chesterfield, VA 23838.

Pool Contact: Donna Castleberry donnac7319@gmail.com
7319 Rosemead Lane (804) 748-0755
Chesterfield, VA 23838