# **Piedmont Bend Recreation Association 2017 Application for Membership**

Swim Season: Saturday, May 6th - Sunday, September 17th

### PRIMARY CONTACT INFORMATION:

Name (Last, First):		
Mailing Address:		
City:	State:	Zip Code:
Primary Phone:	Alternate Phon	ne:
Primary Email Address:		
PLEASE include a valid email addres family about events, updates, closings	<u> </u>	municate with you and your
FAMII V MEMRERS*•		

List the names of *every* Family Member and contact information (for those individuals who need or desire to be notified of news and information regarding the association) of each member. Email address(es) provided will be added to the Piedmont Bend distribution list but will otherwise not be shared. Additionally, we will do our best to make any and all correspondence humorous, inspirational, thought-provoking, and/or enlightening. No guarantees on the latter provision . . .

NAME (Last, First)	EMAIL	PRIMARY PHONE	ALTERNATE PHONE

<sup>\*</sup> A Family Member is defined as a person living in the same household and at the same address, and legally related to the primary member.

Please select of	only <b>one</b> of the following memb	ership levels available.			
	Swim & Tennis		\$425.00		
	Swim Only		\$375.00		
	Tennis Only		\$225.00		
	Social Membership*		\$100.00		
	bership provides (and limits) the and activities hosted by the Pie				
<b>2017 ANNUA</b> Please determ	AL DUES: ine your Annual Dues based on	the following criteria.			
	Membership Fee (from abov	e)	\$		
	Add \$25.00 for dues submitt 2017	ed after June 12,	\$		
Extra or replacement Pool Access Card and/or Tennis Court Key (\$5.00 each)			<b>\$</b>		
TOTAL PAYMENT			\$		
SPECIAL SKILLS: From time to time repairs need to be made down at the pool and tennis area. If you have any special skill set that can help with these types of issues, please check below or list:					
	Electrical*	■ Welding			
	Plumbing*	☐ Tile laying			
	Painting	Landscaping			
	Construction	Other			

**SELECT TYPE OF MEMBERSHIP:** 

<sup>\*</sup>Must be licensed and insured

## **PAYMENT INFORMATION:**

Please return this form and your payment (if by check, payable to Piedmont Bend Recreation Association or PBRA) to:

## **Piedmont Bend Recreation Association** P.O. Box 669684 | Marietta, GA 30066

I have read and agree to the Piedmont Bend Recreation Association Rules and Regulations (a copy of which has been made available to me).			
Signature	Date		
Printed Name			
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or follow us on Facebook