#### FOREST PARK SWIM ASSOCIATION

# **ANNUAL MEMBERSHIP STATEMENT 2021**

# 1. MEMBERSHIP INFORMATION

### Forest Park Swimming Association Bylaws dated January 16, 2003.

<u>Section 2.1.</u> A membership may be owned jointly by husband and wife, or singularly by husband or wife or unmarried head of household. All of the rights, duties, obligations and benefits of a membership shall inure to the immediate family <u>residing together</u> <u>with owner(s) in a single household</u>.

<u>Section 2.2.</u> Member(s) shall designate family members (Limited to (8) eight) each year upon payment of membership dues. Designated family members shall enjoy all rights and privileges of membership.

Designated family members must be related to Member(s) (as a child, stepchild, adopted or foster child, parent, grandparent, grandchild, aunt, uncle or ex-spouse).

Section 2.2.1 Member(s) may, as one of the eight designated Family members, designate a childcare provider who shall enjoy all rights and privileges of membership during the course and scope of performing duties as a childcare provider for a member.

\*\*\*\*Please fill in the blank spaces below. Please return this form with your payment.\*\*\*\*

Family Name			
Address			
Home Phone	1)	2)	
Cell Phone	1)	2)	
e-mail Address	1)	2)	
Primary & Secondary	Member (membership owr	ner)	
1)			
2)			
Designated Family Members		Relationship	Minors birth date
3)			
4)			
5)			
6)			
7)			
8)			

### 2. INSURANCE INFORMATION

Please fill out insurance information if blank or different	Insurance Company	Employee Covered	Group Number	Employee No.
Primary Insurance				
Secondary Insurance				

# 3. **EMERGENCY CONTACTS-** Please indicate who to contact if there is an emergency at the pool.

1) Name	
Phone Number	Cell Phone
2) Name	
Phone Number	Cell Phone