

FAMILY NAME:**FOREST PARK SWIMMING CLUB - PO BOX 21414, CONCORD, CA 94521****ANNUAL MEMBERSHIP AGREEMENT**

THIS FORM MUST BE COMPLETED AND SUBMITTED TO THE BOARD OF FPSA FOR APPROVAL

MEMBERSHIP FEE: \$150.00. **Non-refundable.** (Waived for the 2012 fiscal year)**MEMBERSHIP DUES:** \$390.00* per year. (Subject to change by a vote of the membership) * Dues are discounted to \$365 if paid in full by 3/31/11
Payment can be made (1) in full at the date you join, or (3) installment payments as arranged with the Membership Director.**Payment Due Dates:** \$__130__ Date 3/31/11 \$__130__ Date 4/30/11 \$__130__ Date 5/31/11

I agree to pay the yearly membership dues. I understand that if I do not maintain my membership, per the by-laws, my membership will revert to the Forest Park Swimming Association.

I understand that the pool and payment of dues is governed by the Forest Park Swimming Association by-laws. I acknowledge that I have been given a copy of these by-laws. I agree that my family, my guests and I will abide by the safety rules and code of conduct established by "The Association."

I understand that each membership is responsible for three (3) work commitments, as a part of my membership:

** I will complete **three** work parties, or **pay a \$50.00 per** work party fine for commitments not completed.

A work party is a scheduled gate keeping shift or yard maintenance shift, any combination (3) total. Work parties are scheduled throughout the year. **Fines are due and payable by September 2012, unless alternate arrangements are made with the Board of Directors.**

Address of the membership

Street	City	State	Zip

Signature of Primary Member_____
Print Name_____
Date_____
Signature of Secondary Member_____
Print Name_____
Date_____
Signature of Membership Director_____
Print Name_____
Date_____
Signature of FPSA President_____
Print Name_____
Date

FOR FPSA BOARD USE ONLY:

		PAID: \$
		CHECK #
Start date of membership		PAID: \$
		CHECK #
		PAID: \$
Referred by		CHECK #