

2011 Season Dues Worksheet

Membership Information

Household last name _____

Home address _____

City _____ State _____ Zip code _____

Home phone _____ Alternate phone number _____

Email address _____

Daytime emergency contact _____

Name(s) of adult active member(s) _____

*****Adults must pay dues as active members for dependent children to be members, even if adults do not intend to swim.**

First name(s) of dependent children _____

Dependent children are 3 – 26 years of age and are living at home. Children who are under the age of 3 prior to May 14, 2011 are free.

Name _____ birth date _____ Name _____ birth date _____

Name _____ birth date _____ Name _____ birth date _____

Name _____ birth date _____ Name _____ birth date _____

Name(s) of other adult household member(s) _____

Name(s) of other child household member(s) _____

Name(s) of adult inactive member(s) _____

Season Dues – Payment is due by May 14, 2011

Number of adult active members _____ x \$200/adult = _____

Number of dependent children _____ x \$75/child = _____

Number of other adult members _____ x \$225/adult = _____

Number of other child members _____ x \$100/child = _____

Number of adult inactive members _____ x \$40/adult = _____

Deferred 2nd payment of 2010 initiation fee:

Number of adult active members _____ x \$170/adult = _____

This applies only to those members who joined the pool last year and deferred their 2nd initiation fee payment to this season.

\$35 late fee if mailed after May 14, 2011 _____

(Not applicable to new members.)

2011 Season Dues: _____

Initiation Fee for New Members – Please choose from one of the following two options:

One-time Option: initiation fee paid in full this year.

Number of adult active members _____ x \$500/each = _____

2-Year Option: initiation fee divided over 2 years (includes a deferred payment charge of \$25/adult with 2nd payment)

1st payment due this year:

Number of adult active members _____ x \$250/each = _____

2nd payment of \$275/adult (includes deferred payment charge) not due until May 2012.

Total payment amount: _____

Payment Methods – Please return this worksheet and your payment to: GPSPA Box 244 Garrett Park, MD 20896-0244

Check – Please make check payable to GPSPA

Credit Card – a \$20 charge card processing administration fee will be added to total payment amount.

Circle type of card: Visa, Master Card, Discover or Amex Card number: _____

Name as it appears on card: _____ Expiration date: _____

Card holder signature: _____

Disclosure statement: Membership dues, contributions or gifts are not deductible for Federal income tax purposes.