

FOREST PARK SWIM ASSOCIATION  
**ANNUAL MEMBERSHIP STATEMENT 2022**

**1. MEMBERSHIP INFORMATION**

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

**Section 2.1.** 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 insure to the immediate family **residing together with owner(s) in a single household.**

**Section 2.2.** 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.)**

**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.\*\*\*\***

<b>Family Name</b>			
Address			
Home Phone	1)	2)	
Cell Phone	1)	2)	
e-mail Address	1)	2)	
<b>Primary &amp; Secondary Member (membership owner)</b>			
	1)		
	2)		
<b>Designated Family Members</b>		<b>Relationship</b>	<b>Minors birth date</b>
	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

**4. REFERRED BY:** \_\_\_\_\_