

MEMBERSHIP: ____ Application ____ Transfer	<b>Church Run Community Recreation, Inc.</b>  <b>3901 Westerre Parkway, Suite 100</b> <b>Richmond, VA 23233</b> Email: churchrunpool@yahoo.com
Please complete & mail with payment	
<b>Due Date:</b> 3/31/11.	

**APPLICANT INFORMATION:** Please print clearly.

Last Name \_\_\_\_\_ Email: \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

First Name: (Adults and children)	Date of Birth: (Children only)

<b>2011 FEES</b> cannot be refunded or pro-rated Please circle applicable fees:	
One-time Initiation Fee: A & B only	\$750
Class A Full Membership Fee	\$450
Class A Tennis-only Membership Fee	\$200
Class B Membership Fee	\$475
<b>TOTAL</b> ( <i>Payment must be made by check and included with this application</i> )	

All names must be listed in the membership roster to use the facility.

**MEMBERSHIP TYPE:**  
Please check one.

All persons who reside in the Member's household, and who belong to the Member's immediate family are entitled to the rights of Membership in CRCR. Refer to the RULES for information.

- \_\_\_ Class A - Permanent membership for lot owners in Church Run and Windsor Place only. May be transferred to home purchaser. Is assessable. One-time initiation fee required to join.  
 \_\_\_ Class B - Permanent membership for all others. Not available to any lot owners in Church Run or Windsor Place. Is not transferable. Is assessable. One-time initiation fee required to join.

**AGREEMENT:** Note: THIS APPLICATION MUST BE SIGNED BY BOTH HEADS OF HOUSEHOLD.

The undersigned hereby agree as a condition of membership with Church Run Community Recreation, Inc. ("CRCR") to: A) pay all required applicable fees and/or assessments (Class A & B only) when required by CRCR, B) abide by and adhere to all the facility rules and regulations, and C) by signing, acknowledge that use of a swimming pool/recreation association can be potentially dangerous. I/we hereby agree that we are responsible for our own behavior as well as that of our children and guests. I/we agree that it is our responsibility to oversee the use of the facility by our children and guests. I/we realize that the life guards are employed to keep watch while swimmers are in the water and to act in case of an emergency and not for the purpose of watching or baby-sitting anyone's children. I/we also consent to emergency medical care in the event my family, my guests, or I shall require it in connection with the use of the facility. Further, I/we hold CRCR harmless from all reasonable costs and expenses, including attorney's fee, incurred by CRCR as a result of any claim or suit caused by or resulting from any act or omission by the undersigned, family member or guest of the undersigned at the swimming pool facility, the outcome of which is a determination or agreement that CRCR is not liable.

Signature	Printed Name	Date

Note: THIS APPLICATION MUST BE SIGNED BY BOTH HEADS OF HOUSEHOLD.

**Please Provide an Emergency Contact, Other Than Those Listed Above:**

**Emergency Contact Name/Address:** \_\_\_\_\_

**Phone (home/work/cell):** \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	Membership approved Yes ___ No ___	to Comm Grp
Application due date _____ Application received _____ / _____	Payment received \$ _____ Code 1.      2.      3.	
Application complete Yes    No      Returned to applicant on      Reason:		