

Roxbury Swim and Tennis Club

Application for Annual Membership (May through April)

TYPE OF MEMBERSHIP (select one):

Family **Couple*** **Single**** **Senior Single***** (age 65+) **Senior Couple*****

* Couple membership is only available for 2 adults with no children under the age of 26.

**Single membership is only available for non-married individuals who have no children living with them.

***Senior Couple or Senior Single memberships require one applicant to be 65+ years. Copy of drivers' license required.

Applicant Name(s): _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____

List ALL family members (adults and children under 26) having the above legal address.

Adult 1: _____ **Employer:** _____ **E-mail:** _____

Adult 2: _____ **Employer:** _____ **E-mail:** _____

Child 1: _____ **Birthdate:** _____

Child 2: _____ **Birthdate:** _____

Child 3: _____ **Birthdate:** _____

Child 4: _____ **Birthdate:** _____

Child 5: _____ **Birthdate:** _____

Child 6: _____ **Birthdate:** _____

Please circle how you heard about the club: **Online Search** **Word of Mouth** **Drive-By** **Club Member** **Other**

If you checked off "Club Member" please provide their name(s): _____

Please list 2 sponsoring club members from whom a letter of recommendation will be sent to the Membership Chairperson:

If you do not personally know a club member a tour with the General Manager or a Board representative can be arranged.

I/We hereby apply for membership in the Roxbury Swim & Tennis Club Inc.

Signature 1

Signature 2

Mail Application & \$50 Application Fee to: Roxbury Swim & Tennis Club | 240 Roxbury Road | Stamford, CT 06902

Application fee payable to: **Roxbury Swim & Tennis Club**