

Southeast Guilford Swim Club
4301 Southeast School Rd, Greensboro, NC 27406
Phone: (336)-676-8614, www.swimse.com

2011 TRANSFER MEMBERSHIP APPLICATION

New Member's Name: _____

Address: _____ **City** _____ **State** _____ **Zip** _____

Phone: (hm) _____ (wk) _____ (cell) _____

Email Address: _____

Employer: _____ **Position** _____

Second Adult's Name _____ (cell) _____ (wk) _____

Email Address: _____ **Employer:** _____

Other Family Members living at residence:

	Name	Age	Birthdate	Relation
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

Membership Name and #: _____

Current Owner's Signature: _____

New Owner's Signature: _____

Existing memberships shall be fully paid and current prior to transfer (\$0.00 balance on account). Unpaid original membership fee, past or current yearly dues and any other fees or assessments that are outstanding may be submitted in full with this application.

If accepted for membership, I (we) elect to pay all fees and dues on or before the effective date.

Transfer Fee \$100, plus any past due amount on account.

MAIL TO: Southeast Guilford Swim Club
5465 P Liberty Road
Greensboro, NC 27406

Treasurer's Certification: Account current & all fees paid _____

Board of Director's Action: Accepted _____ Denied _____ Date _____