2010 FAIRFAX SWIMMING POOL, INC. New Member Application

NEW! Save time, and eliminate paper — submit this application **online** — using our **secure** ***www.fairfaxpool.com/application***

NAME OF APPLICANT(S) / NEW STOCKHOLDER(S)	NEW STOCK CERTIFICATE #	APPLICANT HOME PHONE NO.
STREET ADDRESS	APPLICATION DATE	APPLICANT E-MAIL ADDRESS #1
CITY, STATE and ZIP CODE	***EMERGENCY PHONE NO. REQ'D***	APPLICANT E-MAIL ADDRESS #2

Please identify family and other adult members, below:

FAMILY MEMBERS	DATE OF BIRTH	OTHER ADULT MEMBERS	DATE OF BIRTH

STOCK PURCHASE and FEE CALCULATIONS

Stock purchase (*Please provide 4x6 family photo*)	**$ 300.00**
2010 Operating fee	**$ 135.00**
Additional Adult Members @ $20.00 Each • For each additional person 21 years of age or older, including married household occupants under 21 years of age. Excludes all children of members living at home, regardless of age.	**$ .00**
2010 Guest Pass Fees • *****Annual allotment to paid stockholders: 8 passes @ no additional charge.***** • **Pre-paid** guest pass books—*include 5 guest passes @ $20.00 per book.* • *****Additional pre-paid guest pass books available throughout the season.*****	**$ .00**
TOTAL AMOUNT PAID	**$ .00**

Make checks payable to: *FAIRFAX SWIMMING POOL, INC.*
Mail checks, photo with this statement to: Fairfax Swimming Pool, Inc., P.O. Box 572, Fairfax, VA 22038

I and members of my household agree to abide by all rules and regulations of the Corporation:

APPLICANT'S SIGNATURE

DATE _____

HOW DID YOU HEAR ABOUT THE POOL? *(circle)*

Web site Pool Sign (at pool) Yard Sign (residence)
Brochure Flyer/Leaflet (at door) Word-of-mouth
Open House Other: _____

MEMBERSHIP CHAIR or CORPORATE OFFICER SIGNATURE

DATE _____

Visit us on the Web at ***www.fairfaxpool.com***

E-mail us at ***fspool@fairfaxpool.com***