



Columbia Country Club

2017 Application for Summer Membership

MEMBERSHIP DATES: MAY 27TH - SEPTEMBER 4TH



CCC APPLICANT INFORMATION

Name of Member:

Address: City: Zip:

Email Address:

Telephone: (Home) (Cell) (Work)

Spouse Name: Spouse Telephone:

Spouse Email:

EMERGENCY CONTACT INFORMATION

Name: Relation: Ph:

DEPENDANT INFORMATION

Name: <input style="width: 95%;" type="text"/>	DOB: <input style="width: 25%;" type="text"/>	Age: <input style="width: 25%;" type="text"/>	Swim Team: <input style="width: 95%;" type="text"/>
Name: <input style="width: 95%;" type="text"/>	DOB: <input style="width: 25%;" type="text"/>	Age: <input style="width: 25%;" type="text"/>	Swim Team: <input style="width: 95%;" type="text"/>
Name: <input style="width: 95%;" type="text"/>	DOB: <input style="width: 25%;" type="text"/>	Age: <input style="width: 25%;" type="text"/>	Swim Team: <input style="width: 95%;" type="text"/>
Name: <input style="width: 95%;" type="text"/>	DOB: <input style="width: 25%;" type="text"/>	Age: <input style="width: 25%;" type="text"/>	Swim Team: <input style="width: 95%;" type="text"/>
Name: <input style="width: 95%;" type="text"/>	DOB: <input style="width: 25%;" type="text"/>	Age: <input style="width: 25%;" type="text"/>	Swim Team: <input style="width: 95%;" type="text"/>

Registration Type: Early Bird Phase I \$575 Early Bird Phase II \$625 Standard Registration \$700

Payment Information: CASH CHECK CREDIT CARD (5% Fee) Auto Bank Draft: Y N

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Applicant Signature: _____ Date: