

**WALDEN GLEN SWIM & RACQUET CLUB, INC.**  
MEMBERSHIP APPLICATION

**Family Name:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

**Address** (include city and zip): \_\_\_\_\_

**Email:** \_\_\_\_\_ **cell phone** \_\_\_\_\_

**Emergency Contact and Phone:** \_\_\_\_\_

**Adult Members** (over 18 years of age): \_\_\_\_\_

<u>Children</u>	<u>Date of Birth</u>	<u>Children</u>	<u>Date of Birth</u>

**Daycare Provider:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

(If non-member, please add \$75 for seasonal guest fee)

**Seasonal Guests:** \_\_\_\_\_

(person temporarily living in the house of a guest, please add \$75 for seasonal guest fee)

<b>FEES:</b>		<b><u>Until June 15, 2009</u></b>
Membership Fee (non-refundable, non-transferable)	\$100.00	\$ 1.00
Family membership annual dues*	\$275.00	\$275.00
Annual Maintenance Fee**	\$ 85.00	\$ 85.00
<b>TOTAL</b>	<b>\$460.00</b>	<b>\$361.00</b>

\* Individual adult membership annual dues is \$140

\*\*\$75.00 of the annual maintenance fee is completely refundable to members contributing at least 4 hours of labor during officially designated work days.

**Please mail application and check payable to 'Walden Glen' to**  
Walden Glen Swim & Racquet Club, c/o membership, PO Box 2452, Springfield, VA 22152

**I certify that the individuals listed above are members of my household living at the above principle address.**

Signed \_\_\_\_\_ Date \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Referred by: \_\_\_\_\_

If you have any question regarding Walden Glen membership or this application, please call our Membership number at 703-944-3264

**Walden Glen Swim and Racquet Club publishes a yearly membership directory, distributed to members only.**

Please check the box if you **DO NOT** want your information included in our directory.

Please check the box if you **DO NOT** want a copy of the directory.