

Parklawn Recreation Association - New Membership Application 2019

www.parklawnpool.org

Last Name(s):

Address:

Home Phone:

Name/Cell Phone 1:

Name/Cell Phone 2:

Name/Cell Phone 3:

Name/Work Phone 1:

Name/Work Phone 2:

All persons on membership form MUST RESIDE at the address above. Please list all people on the membership below (see page 2 for additional members) with birthdate and age including all children despite age:

Full Name / Age	Birthdate XX/XX/XXXX
1)	
2)	
3)	
4)	
5)	
6)	

We mainly communicate with our members through email. Please list all email addresses you would like to receive PRA info from regarding updates, invitations, alerts, etc. Please crosswalk emails to members on form.

Name/Email 1:

Name/Email 2:

Name/Email 3:

Membership Category (children ages 3 & under are "free")	New Member Rate
Family Membership (up to 6 members)	\$475
Each Additional Member	\$25 each
Couple or Two-Person Membership	\$325
Single Membership	\$230
Single Senior (65+)	\$200
Senior Couple (65+)	\$295

This is a (circle one) Family - Couple - Single - Single Senior - Senior Couple Membership	\$ _____
Additional Family members - \$25 x ____	\$ _____
The BOD extended the pool schedule in 2019 to mid-September. Please support this extension if you're able by making a small donation ~ \$25 is suggested.	\$ _____
TOTAL SUBMITTED	\$ _____

Return this form to: PRA, c/o 3863 Barcroft Lane, Alexandria, VA 22312-1162. Include check payable to PRA or visit www.parklawnpool.org to pay by credit card. Your membership is not complete until we receive your application and payment.

Additional Members of Household

Name / Age	Birthdate XX/XX/XXXX
7)	
8)	
9)	
10)	
11)	
12)	

With the membership categories in this form, you will become a voting member of PRA with all the rights and responsibilities associated with being a member of PRA. A copy of the by-laws and rules can be found on the PRA website: www.parklawnpool.org