

Twinbrook Swimming Pool
13027 Atlantic Avenue, Rockville
<http://www.twinbrookpool.org>
2010 GA Roommates
Membership Application

Mailing Address
Twinbrook Swimming
Pool
P.O. Box 705
Rockville, MD 20848

Cost: \$100 (for the months of May and June only)

Description

- 3 or 4 adults sharing a residence

Notes

- Only persons who have never been a member at the Twinbrook Swimming Pool are eligible for the Get Acquainted Roommate Membership.
- Persons using this membership will be considered first year members.
- The Get Acquainted \$100 Membership payment will be applied to full summer dues for those who wish to continue for the rest of the summer. Other discounts, including the first year discount, can also be used.

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Address _____ City, State, Zip _____

Applicant #1 Information

Last Name _____ First Name _____

Phone _____ Work Phone _____

E-mail (s) _____

Applicant #2 Information (must share residence with Applicant #1)

Last Name _____ First Name _____

Phone _____ Work Phone _____

E-mail (s) _____

Applicant #3 Information (must share residence with Applicant #1)

Last Name _____ First Name _____

Phone _____ Work Phone _____

E-mail (s) _____

Applicant #4 Information (must share residence with Applicant #1)

Last Name _____ First Name _____

Phone _____ Work Phone _____

E-mail (s) _____

LIABILITY WAIVER/HOLD HARMLESS AGREEMENT:

By signing below I agree that I am voluntarily participating in activities and use of facilities and premises (including the parking lot) and assume all risk of injury, illness, damage or loss to me, my guests or to my property. I further agree that I shall hold this club, its directors, and agents harmless from any and all loss, claims, injury, damages or liability.

COST: \$100

Sign below and return form and check, made payable to Twinbrook Swimming Pool, P.O. Box 705, Rockville, MD 20848. If paid using credit card online, please attach a copy of the online receipt.

All names below agree to abide by the rules stated by Twinbrook Swimming Pool. Signers verify that all information supplied on this application is correct.

| | | |
|-----------------------|--------------------|---------------|
| _____ Print Name 1 | _____ Signature | _____ Date |
| _____ Print Name 2 | _____ Signature | _____ Date |
| _____ Print Name 3 | _____ Signature | _____ Date |
| _____ Print Name 4 | _____ Signature | _____ Date |