

**MIDWAY SWIM & RACQUET CLUB, INC.**  
**APPLICATION FOR MEMBERSHIP**  
P.O. Box 994 Welcome, NC 27374

Date: \_\_\_\_\_

**Check one only:**

Seasonal - Single \$225.00

Full - Single \$ \$450.00

Seasonal - Family \$375.00

Full - Family \$ 600.00

*(One time only)*

Paid: Check # \_\_\_\_\_ / Cash \_\_\_\_\_

Your Name: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

Address: \_\_\_\_\_

Home Telephone Number: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_

Spouse's Position: \_\_\_\_\_

Married: \_\_\_\_\_

Single: \_\_\_\_\_

Divorced: \_\_\_\_\_

**NAMES OF MEMBERS LIVING IN THE HOUSEHOLD: (Only list birthdates for children)**

Name	Birthday (month/day/year)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**NAME(S) IN WHICH MEMBERSHIP SHOULD BE:**

\_\_\_\_\_

We/I hereby apply to become a member in the Midway Swim & Racquet Club, Inc. We/I agree to abide by the by-laws and regulations of the club.

Applicant(s) signature(s): \_\_\_\_\_