

APPLICATION FOR MEMBERSHIP

HANARRY SWIM & RACQUET CLUB

P.O. BOX 294

LILBURN, GA 30048-0294

Full Name: _____

Spouse: _____

Dependent's Name	Date of Birth

Street Address: _____

City, Zip: _____

Subdivision: _____

Phone(s):

Email(s): _____

Date: _____

If referred by an HSRC member, please list:

How did you find out about Hanarry Swim and Racquet Club?

I certify the above information is correct and hereby apply for membership in HSCR.

Signature

Costs		
Bond Fee:	\$400.00	(Refundable when membership is sold based upon yearly dues being current)
	0	
Yearly Dues:	\$350.00	
	0	
Yearly Work Fee:	\$50.00	(will be credited to account upon member participation in one of the HSRC scheduled work days)

Please complete application and return, with check payable to HSRC to:

Hanarry Swim and Racquet Club

P.O. BOX 294

Lilburn, Georgia 30048

If you have any questions, please call:

Mark DeArmon, Membership Chair: 770-806-0464

If you would like to drop your application off at someone's house, please call one of the people mentioned above to make arrangements.