

**2020 RENEWAL APPLICATION FOR MEMBERSHIP**

**① CONTACT INFORMATION**

Family Name: Street Address: City/State/Zip:	Home Phone: Work/Cell Phone: E-mail #1: E-mail #2:
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Please clearly print any corrections or additions to your contact information below. All data will be kept confidential.

**FAMILY MEMBERS**

**②**

Please clearly print any corrections, additions, or deletions to your family members who will be using the club. Add the relationship to the primary member (Husband, Wife, Child, etc.), and verify the person's birthdate and their age as of 1/1/2020. ***If you do not have your membership key ring tag, please check the lost tag box (\$5 charge per lost tag). Newly added family members will not be charged a lost tag fee.***

Family Member	Relationship to Primary Member	Birthdate (MM/DD/YYYY)	Age as of 1/1/2020		Lost Tag?
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

A family member is considered a person living in the same household and at the same address, and legally related to the primary member. We reserve the right to request proof of relationship in order to determine any family member listed is eligible for membership as part of this family. Kenmont also allows au-pairs, nannies, or child care providers to be listed as an eligible family member provided that they are working at least 20 hours per week in this capacity. Kenmont does not discriminate on the basis of race, creed, national origin, religion, age, sex or handicap. ***Children under 3 as of 1/1/2020 are FREE from dues, but still must be listed as members on the application.***

**③ INITIATION FEE**

As a **Class A Lifetime Voting Member**, you have no Initiation Fee.

**Complete Reverse Side** →

**④ ANNUAL DUES – Extended Summer Season May 23 – September 13, 2020**

Please determine your family’s 2020 Annual Dues based on the following criteria.

Circle the number of family members listed who are age 3 or older as of 1/1/2020.

1      2      3      4  
\$390    \$525    \$600    \$675

Add \$55 for each additional member who is age 3 or older as of 1/1/2020.

+ \$ \_\_\_\_\_

Subtract \$25 for each adult (up to two) who is age 62 or older as of 1/1/2020.

- \$ \_\_\_\_\_

Or, if “Inactive” for 2020, just enter \$150 for Total Dues.

**TOTAL DUES:**                    \$ \_\_\_\_\_

**⑤ PAYMENT INFORMATION**

Please complete the following information to pay for your 2020 Membership.

from **④ TOTAL DUES:**                    + \$ \_\_\_\_\_

**Capital Improvement fee, \$150.00 per family (active members only):** + \$ 150.00

**Pre-purchase Guest Passes** \_\_\_\_\_ **Passes x \$7 each:**                    + \$ \_\_\_\_\_

**If received after April 1<sup>st</sup>, Add Late fee of \$50:**                    + \$ \_\_\_\_\_

**Lost Tags?** \_\_\_\_\_ **Lost Tags x \$5 each:**                    + \$ \_\_\_\_\_

**TOTAL AMOUNT DUE:**                    \$ \_\_\_\_\_

Enclosed is a check payable to Kenmont for the total amount due (Check # \_\_\_\_\_)

I authorize Kensington Heights Recreation Association, Inc. to charge my credit card for the actual total amount due.

VISA                     MasterCard

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_                    CCV (3-digit code on back of card): \_\_\_\_\_

**⑥ IMPORTANT – ALL PRIMARY MEMBERS MUST READ AND SIGN**

I hereby apply for 2020 membership at the Kenmont Swim & Tennis Club, and acknowledge that my family members and I have read and agree to abide by the Rules and Regulations, and the By-Laws of the Club (available at www.kenmont.com). I also acknowledge and agree that all members of my family and our guests will follow the directions of the lifeguards and club management at all times. **Failure to do so may result in removal from the pool or the facility, or suspension or loss of membership without refund.**

Furthermore, I hereby agree to indemnify, defend, and hold harmless Kensington Heights Recreation Association, Inc. and each of its directors, officers, agents, managers, employees, volunteers, successors and assignees from and against any and all claims, demands, defense costs, liability, expense, or damages (direct and indirect) of any kind or nature arising from or in connection with my family’s and/or my guest’s use and/or occupancy of the facility, or arising out of any act or omission of my family and guests. **I acknowledge that if this application is received after April 1st, 2020, a \$50 late fee is required, and my membership will be designated as “INACTIVE” for the 2020 season if space is unavailable when the application is received.**

X  
Signature of Primary Member

\_\_\_\_\_ Date