

Bay Springs Country Club Swimming, Tennis & Fishing Membership Application

(This limited membership does not include golf OR voting rights.)

Name _____ Date of Birth _____

Spouse's Name _____

Mailing Address _____ Home ph. _____

_____ Cell ph. _____

E-mail address _____

Employer _____ Work ph. _____

<u>Name of Children</u>	<u>Age</u>	<u>In School Where?</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of Babysitter(s) _____

(Children listed must live with you or belong to you or your spouse unless special arrangements have been made in advance. **Children age 21 and up who are married or are not in school are not eligible under their parent's membership.**) A non-member babysitter may only come if a parent can't or if member has 2 or more small children. Babysitters are not allowed to bring a guest except on guest day. Babysitters must stay at the pool. The undersigned hereby makes application for a summer swimming and year round tennis and fishing membership at Bay Springs Country Club, and when accepted agrees to abide by all the rules and regulations as set forth in the By-Laws of Bay Springs Recreation Assoc., Inc. and those rules and regulations set forth in the rules of the pool and tennis facility.

It is understood that the cost for this limited membership is **\$200.00**. (Fee for new member for 1st year is \$225.00) Full fee is due with remittance of application. Any person participating in this program has the option to become a full member of Bay Springs Country Club, and provided they have paid their full fee for this program, the initiation fee to join as a full member will be waived. (This transfer must be made prior to July 1st.) All first time members must be recommended by 2 current voting members in good standing and require approval by the Board of Directors. When we receive your application and fee, you may assume you have been approved for membership and begin using the facilities immediately unless notified otherwise.

Periodically we will be taking pictures and adding them to our website. No names will be used. Please indicate if we may use your photo. Yes _____ No _____

Applicant's Signature _____ Date _____

The following recommendations are required for all **1st time** members and fee is **\$225.00** the first year.

Recommended by 1. _____

Voting Members Name _____ Voting Members Phone Number _____

2. _____

Voting Members Name _____ Voting Members Phone Number _____

Be sure to ask for a copy of pool rules and guest rules when you submit this application.

**Mail application to: Susan McNeil, P. O. Box 444, Bay Springs, MS 39422
Phone 601-764-3403 or 764-8444 / Email smcneil@bayspringstel.net**

