



Club Marinole 2019 Membership Dues

802 Judith Dr., Kettering, OH 45429

Form and payment may be mailed to:

Sarah Howdeshelt
801 Sequoia Court
Kettering, OH 45419

Questions? Email us: info@clubmarinole.com

All Information is Required Each Year for Liability and/or Emergency Purposes.

Membership Dues
Family I (4 or more family members)

Last Name: _____
First Name: _____
Spouse: _____
Address: _____
City & Zip: _____
Home Phone: _____
Cell Phone: _____
Spouse Cell Phone: _____
Email: _____
Spouse Email: _____
Occupation: _____

2019 Seasonal Dues: \$430.00

Membership Fee: \$_____

To become an active member, there is a 1 time membership fee of \$300. You can pay the full amount or pay \$100 for 3 years.

Please fill in the amount you will be paying next to Membership Fee.

Tax (7.5%) \$_____

TOTAL Due by June 1, 2019: \$_____

Donation: \$_____

Guest Passes \$_____

(\$20 for 5 passes)

Add \$25 late fee if paid on or after June 2, 2019.

\$25 Referral Credit \$_____

(from previous year - up to \$100)

Name of Referral (s): _____

TOTAL AMOUNT PAID: \$_____

Family Member (tax dependent)

Name: _____ DOB: _____
Name: _____ DOB: _____
Name: _____ DOB: _____
Name: _____ DOB: _____
Name: _____ DOB: _____
Babysitter: _____

Emergency/Medical Information

Emergency Contact: _____
Phone: _____
Family Doctor: _____
Phone: _____
Other Medical Info: _____
Preferred Hospital: _____

Payment Information

Check (Club Marinole)

Credit Card
(Visa, MC, Discover, & American Express)

Card #: _____

Name on Card: _____

Exp. Date: _____ Zip: _____

CCV (3 digit code on back): _____

Early Bird Special: If payment with data sheet is received on or before April 1, 2019, you will receive 5 FREE GUEST PASSES!

*Member Packets will be handed out at the Front Desk when the pool opens.

**When checking in, please provide your name to the Front Desk Attendant.

Check if you do not wish to have your info published in the Directory.