



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 TRIAL (1st year member)

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

2019 Seasonal Dues: \$250.00
Tax (7.5%) \$18.75
TOTAL Due by June 1, 2019: \$268.75
Donation: \$_____
Guest Passes \$_____
(\$20 for 5 passes)
TOTAL AMOUNT PAID: \$_____

Family Member (tax dependent)

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

Referred by: _____

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!

Emergency/Medical Information

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

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

*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.