

Membership Application

Revised

Part 1 - Name & Address of the primary member

Name: (Last) _____ (First) _____ Birth Date ____/____/____

Street Address _____

City _____

Cell Phone _____

Email Address _____

Home Phone _____

How did you hear out about the Oak Brook Swim & Tennis Club? _____

Name of Family Member	Relationship	Birth Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

Part 2 - Type of Membership

Unlimited Swim Memberships

Resident	Fee
<input type="checkbox"/> Family Swim	\$790
<input type="checkbox"/> Couples Swim	\$600
<input type="checkbox"/> Individual Swim	\$465
<input type="checkbox"/> Senior Family Swim	\$675
<input type="checkbox"/> Senior Individual Swim	\$365

Corporate Resident	Fee
<input type="checkbox"/> Family Swim	\$1,100
<input type="checkbox"/> Couples Swim	\$675
<input type="checkbox"/> Individual Swim	\$550

Non-Resident	Fee
<input type="checkbox"/> Family Swim	\$1,295
<input type="checkbox"/> Couples Swim	\$750
<input type="checkbox"/> Individual Swim	\$600
<input type="checkbox"/> Senior Family Swim	\$990
<input type="checkbox"/> Senior Individual Swim	\$550

Limited Swim Memberships

Resident/Corporate/Non-Resident	Fee
<input type="checkbox"/> 15 Punch Pass	\$375

Tennis Memberships	Fee
<input type="checkbox"/> Family	\$450
<input type="checkbox"/> Individual	\$350
<input type="checkbox"/> Tennis Add-On Family	\$200
<input type="checkbox"/> Tennis Add-On Individual	\$200

In-House Charge
 I hereby authorize an In-House charge account. I understand that my credit card or debit card will be automatically debited for all in-house charges.

Applicant's initial _____

Part 3 - Payment Options

<input type="checkbox"/>	Cash
<input type="checkbox"/>	Check
<input type="checkbox"/>	Credit Card

Card Number _____

Exp. Date ____/____

Security Code _____

Signature _____

Part 4 - Review & Sign

I agree to the following terms:

(1) To assume responsibility for credit extended by the Sports Core on the basis of this membership; (2) To comply with the rules and policies governing the operation of the Sports Core (see Title 12 of the Village Code of Ordinances entitled, "Village Recreational Facilities"); (3) To pay the Sports Core for all purchases made and credit obtained by any person included on this membership; (4) To notify the Sports Core promptly in writing of loss of the membership card(s) or any changes in address or telephone number. I understand that an interest fee of one and five tenths percent (1.5%) (18% annual rate) will be charged to my balance if it is not paid within thirty (30) days of the statement date. I further understand that if my account is sixty (60) days past due, my membership status will be terminated. Challenges to charges must be made within forty-five (45) days of the statement date. I hereby grant permission to the Village of Oak Brook to use photographs of individuals listed on this application, without further consideration, and hereby release the Village of Oak Brook and its trustees, officers, employees and legal representatives and assigns from any and all claims, actions and liability relating to its use of said photographs.

Applicant's Signature _____

Date _____

Completed applications with full payment can be mailed to Oak Brook Swim & Tennis Club, 800 Oak Brook Road, Oak Brook, IL 60523
 You can also fax your membership with payment to: 630-368-6423 | Email: cthompson@oak-brook.org