

Ridgetop Recreation Association



APPLICATION FOR MEMBERSHIP

Send (with payment) to:

Ridgetop Recreation Association
c/o Shawna Wood Shade
7703 Wood Road; Richmond, VA 23229

Note: The application must be signed by three Ridgetop members in good standing, who know and can personally recommend you. Signing members will be contacted to confirm their commendation. Only one sponsoring member per membership may sign.

Date of Application: _____

Applicant Full Legal Name (Last Name First Name M.I.):		Spouse Full Legal Name (Last Name First Name M.I.):	
Address:		Zip:	Primary Phone #:
Email Address (required): Note: This will be our method of communicating the status of your application while on the waiting list.)			
Other Swim & Tennis Memberships?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please list existing or pending membership club names:
Children:	Name	Birth Date	Sex
EMPLOYMENT INFORMATION (As Applicable):			
Husband's Occupation:		Wife's Occupation:	
Name & Address of Employer:		Name & Address of Employer:	
I (we) understand hereby apply for membership in the Ridgetop Recreation Association, Inc., and agree that if accepted, shall abide by all the rules, regulations, and bylaws of the Association, during both the wait list and membership status. This application is subject to action of the Ridgetop Membership Committee and Board of Directors, and that the right to refuse this application is reserved. Payment of the application fee (\$35) must accompany the application.			
SIGNATURE OF APPLICANT:			
SIGNATURE OF SPOUSE:			
FIRST SPONSORING MEMBER Signature:			
Printed Name	Email Addr:	Best Phone # for Contact:	
SECOND SPONSORING MEMBER Signature:			
Printed Name	Email Addr:	Best Phone # for Contact:	
THIRD SPONSORING MEMBER Signature:			
Printed Name	Email Addr:	Best Phone # for Contact:	
Date Received by RT: Date Accepted by Board: Application #:			