



Application for Membership

Send (with payment) to:
 Ridgetop Recreation Association
 C/o Alexis Lyons
 9604 Della Drive; Henrico, VA 23238

Date of Application: _____

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.

Applicant Full Legal Name (Last, First, M.I.)		Spouse Full Legal Name (Last, First, M.I.)	
Address:	Zip:	Primary Phone:	

Email (required):			
<i>Note: This will be our method of communicating the status of your application while on the Waiting List</i>			
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
Name	Birth Date	Sex
Name	Birth Date	Sex
Name	Birth Date	Sex

EMPLOYMENT INFORMATION (As Applicable)	
Applicant's Occupation:	Spouse's Occupation:
Name and Address of Employer:	Name and Address of Employer:

I (we) 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 this application.

Signature of Applicant:		
Signature of Spouse:		
First Sponsoring Member Signature:		
Printed Name:	Email:	Phone:
Second Sponsoring Member Signature:		
Printed Name:	Email:	Phone:
Third Sponsoring Member Signature:		
Printed Name:	Email:	Phone:

Date Received by RT:
 Date Accepted by Board:
 Application #