



# ROCKY LEDGE SWIMMING ASSOCIATION, INC.

Mailing: P.O Box 426 • White Plains, NY 10603  
Address: 1402 Old Orchard Street • White Plains, NY 10604  
[www.rockyledgeswimmingassn.com](http://www.rockyledgeswimmingassn.com)

June \_\_\_\_\_  
July \_\_\_\_\_  
Aug \_\_\_\_\_

## Monthly Invoice 2017

Member's Name (last, first) \_\_\_\_\_ Spouse \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ email: \_\_\_\_\_

Please list Junior Members. A Junior Member is a dependent child of an active member 23 years of age or younger:

Name	Date of Birth	Name	Date of Birth

### Check as applicable

		Amount	Tax	Total
	Single	\$300.00	\$22.13	\$322.13
	Couple	\$350.00	\$25.82	\$374.82
Up to Four	Family	\$400.00	\$29.50	\$429.50

For Office Use.

Total Amount: \_\_\_\_\_  
Date Rec'd. \_\_\_\_\_  
Cash/Check \_\_\_\_\_

Choose one: Visa    Mastercard \$10.00 fee  
Credit Card No. \_\_\_\_\_  
Exp. Date: \_\_\_\_\_  
Sec. Code: \_\_\_\_\_