



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

Bond Holder No. _____

Member 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

Season pricing is \$745.00 for a family up to four and each family will receive 5 free guest passes, more than four in a family would be an additional \$75.00 per person. \$100.00 for a Special Member (over 23 years of age residing in the same household, 18 years over au pair, or an adult babysitter).

Check as applicable	Amount	Tax	Total	After 4/1
up to four Family	\$745.00**	\$54.94	\$799.94	\$849.94
Over four Family	\$820.00**	\$60.48	\$880.48	\$930.48
Up to two Seniors (2)	\$600.00**	\$44.25	\$644.25	\$694.25
Seniors (1)	\$400.00**	\$29.50	\$429.50	\$479.50
Special	\$100.00	\$ 7.38	\$107.38	

****THE SPECIAL ASSESSMENT OF \$500.00 APPROVED AT THE ANNUAL MEETING IS DUE NO LATER THAN MAY 15, 2017****

For Office Use.

Total Amount: _____ Choose one: Visa Mastercard
 Date Rec'd. _____ Credit Card No. _____
 Cash/Ck _____ Exp. Date: _____
 Sec. Code: _____