



P.O. Box 393
Sykesville, MD 21784
www.FreedomSwimClub.org
(410) 795-9778

The Freedom Swim Club is a non-profit organization with a family membership of 300. To become a member, each family purchases a bond, pays the initiation fee and the annual dues. The family is then entitled to full use of the facilities and one vote on any issues raised at the annual meeting.

The cost of the bond is returned when a family resigns and another family on the waiting list purchases the membership. The application fee and initiation fee are non-refundable.

Applications are received with application fee and placed on the waiting list by order of date received. When a resignation is received in writing, the membership is offered to the first person on the waiting list, who has the option to accept, refuse, or be put at the end of the list for consideration again when their application comes to the top of the list. This can only be done one time. The membership is offered to those on the waiting list until it is accepted.

The cost of the bond and initiation fee are to be paid within 30 days of acceptance of membership and the annual dues are paid within 30 days of receipt of the invoice (usually by April 1):

APPLICATION FEE	\$25.00 (Non-Refundable)
COST OF BOND	\$550.00
INITIATION FEE	\$50.00 (Non-Refundable)

Please mail your application and application fee (\$25.00) to the address below. Once your application and fee has been received, your family will be put on the waiting list and assigned a number, which will be e-mailed back to you. This will be your reference number. ANY/ALL inquires with regards to membership/waiting list must be done in writing. Email (membership@freedomswimclub.org) or mail our inquiries to the address below referencing your application number.

NOTE: IT IS YOUR RESPONSIBILITY TO ADVISE FREEDOM SWIM CLUB MEMBERSHIP OF ANY CHANGE OF ADDRESS OR MOST IMPORTANTLY, CHANGE OF EMAIL OR PHONE NUMBER.

MEMBERSHIP CHAIRPERSON

**Mail completed Membership Application to:
Freedom Swim Club
6551 Tydings Road
Eldersburg, MD 21784**



Membership Application

Applicant's Name: _____

Telephone Number: _____

Address: _____

Email Address: _____

Name of Spouse: _____

Minor Children (Names & Birthdates):

Past or Present Membership in other Clubs: _____

Recommended By: _____

Today's Date: _____

Signature of Applicant: _____

(Please do not write below this line)

Date Application added to list: _____ Application #: _____

(Date Interviewed)

(Chairperson, Membership)

(Date Accepted)

(President)

(To be returned to applicant)

Applicant's name: _____

Date Application added to list: _____

Application #: _____

