

# WaterWorks Non-Resident Membership – 2017 Registration Form

Membership Type & Fees (Check appropriate section)

Cash or Check ONLY (Credit Cards are no longer accepted)

\_\_\_\_\_ FAMILY MEMBERSHIP: \$735.00

\_\_\_\_\_ INDIVIDUAL MEMBERSHIP: \$355.00

\_\_\_\_\_ SENIOR MEMBERSHIP (Age 62 & up): \$235.00

**\*FULL TIME STUDENT STATUS PROOF MUST BE INCLUDED WITH MEMBERSHIP FORM  
\*\*PROOF OF AGE MAY BE REQUESTED\***

Last Name: \_\_\_\_\_  
*(Membership Will Be Listed Under THIS Last Name)*

Address \_\_\_\_\_  
Street City State Zip

Phone \_\_\_\_\_  
Home // Emergency

E-Mail address \_\_\_\_\_  
**(Please print clearly - E-mail address needed for confirmation receipt and any Pool updates)**

Family Members: (Please list ALL family members who will be included in this membership)

	<u>First Name</u>	<u>Birth Date</u>	<u>Sex</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

I attest that all information I have provided is true. I understand that falsification of information may result in the loss of membership and fee.

\_\_\_\_\_ Signature \_\_\_\_\_ Date

**Refund Policy:** Refunds will be granted to applications if requested prior to May 1, 2017. A 20% administrative fee will be deducted from all refunds. **No refunds will be given after May 1st.**

*Cash or Check Only – Credit Cards No Longer Accepted*  
*Please make checks payable to:*  
**“West Windsor Township – Pool Utility”**  
Mail to: West Windsor Township Recreation Dept.  
P.O. Box 38  
West Windsor, NJ 08550

**\*\*\*\*\*Office Use Only\*\*\*\*\***  
DATE: \_\_\_\_\_  
PAYMENT AMOUNT: \_\_\_\_\_  
Check# / Cash: \_\_\_\_\_