



MEMBERSHIP FORM

Name: _____

Membership Type (Single or Family): _____

Souse's Name (If Applicable): _____

Address: _____

Home Phone: _____

Work Phone: _____

Email: _____

Children Names and Dates of Birth: _____

Emergency Contact: _____

Phone: _____

CHECKS:

**CHECKS CAN BE MADE OUT AND MAILED TO:
BIRCHTREE SWIM & RACQUET CLUB
P.O. BOX 26182
HOOVER, AL 35260**

MEMBERSHIP:

**SINGLE MEMBERSHIP - CASH OR CHECK \$285
SINGLE MEMBERSHIP - CREDIT / DEBIT \$300
FAMILY MEMBERSHIP - CASH OR CHECK \$460
FAMILY MEMBERSHIP - CREDIT / DEBIT \$475**