



Kendbrin Swim & Tennis Club Application for Membership

Name _____ Occupation _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Spouse _____

Name(s) of child(ren) _____	Birthdate _____
_____	Birthdate _____
_____	Birthdate _____
_____	Birthdate _____

Names of two current members (if possible):

1. _____ 2. _____

DUES ARE SUBJECT TO CHANGE.

Please return this application with a non-refundable application fee of \$40 to:

Kendbrin Swim & Tennis Club P.O. Box 281, Barrington, RI 02806

NOTE: All applicants will be notified of disposition of application and further details of club. This application is governed in accordance with the bylaws, rules, and regulations of the Kendbrin Swim & Tennis Club. All fees and dues are subject to change. Application fee is non-refundable. An initiation fee of \$225 is charged to new members. Your signature is our acceptance of these terms.

Signature _____ Date _____