2023 Tot Hill Farm Golf Club
Pool Membership Application

PERSONAL INFORMATION

Name: _____

Cell Phone: _____Current Email Address:_____

Spouse or Significant Other (living in the same home):_____

Cell Phone: _____Current Email Address:_____

Home Address: _____

City: _____State:_____Zip Code _____

PLEASE CHECK MEMBERSHIP TYPE: (ONE APPLICATION PER FAMILY/COUPLE)

Family	_____$520 one seasonal payment	or	_____5 monthly payments of $107.12
Couples	_____$430 one seasonal payment	or	_____5 monthly payments of $88.58
Single	_____$400 one seasonal payment	or	_____5 monthly payments of $82.40
Tot Hill Townhouse	_____$250 one seasonal payment	or	_____5 monthly payments of $51.50

MEMBERSHIP INFORMATION:

Names and ages of children living in the household

_____ _____

_____ _____

A PARENT OR GRANDPARENT MUST ACCOMPANY ANY CHILDREN UNDER AGE 14 AT THE POOL.

NAME(S) OF GRANDPARENT(S):

_____ _____

_____ _____

EMERGENCY CONTACT:

Name: _____Phone: _____

Your signature indicates you will read the pool rules, and you will abide by them.

Make checks payable to: **Tot Hill Farm Golf Club** and bring to the club house office or to the pool on opening day. Cash, debit, and credit card payment are also accepted. Monthly drafted payments must be set up at the club house or by filling in this digital credit card authorization form formswift.com/self-serve-recipient-builder?documentType=ct-nWPiD8zl0WprHDQ3gOgLPVtKxzCvyF6R

APPLICANT'S SIGNATURE: _____DATE: _____