

NOB HILL SWIM CLUB

2024 Non-Resident Application
Rolling Acres Improvement Association (RAIA)
9538 Westwood Drive | Ellicott City, MD 21042 | 410-461-9120 www.nobhillswimclub.com

RENEWAL				
Adult family members - head/s of (Returning members must complete thi				
Last name:		First name:		
Last name:		First name:		
Address:		Email address:		
		Email address:_		
Home phone		Work/other phor	ne:	
Other family members living at th	ne above address:	(Residency verif	ication may	be required)
Last name:	First name:		Age:	Relationship:
Last name:	First name:		Age:	Relationship:
Last name:	First name:		Age:	Relationship:
Last name:	First name:		Age:	Relationship:
*Families with more than 6 people living	within the home must	pay an additional \$	50 per person	above 6.
Families who employ a live-in or oth family's children may either add this Membership, or the family may choopool. If you choose to take advanta information on the membership app	s person onto their nose to pay the daily age of this members	nembership by op y guest pass fee ship option, please	ting for the severy time the N	special Nanny the nanny visits the lanny Membership
Nanny Membership Add-on In the event you've NOT yet finaliz with your application and complete	zed your summer nani			
Nanny information:				
l ast name:	⊑ i,	ret name:		Δαο:

2024 NON-RESIDENT MEMBERSHIP RATES

Complete the application summary section to calculate your application total

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MEMBERSHIP	\$615
TWO ADULT MEMBERSHIP	\$440
SINGLE MEMBERSHIP	\$265
Membership Add-Ons: (may only be purchased with membership Card - Buy 10 get 2 Free! Additional Membership Card	ership) \$80 \$20
2024 Pool Membership registration fee from above	\$
Memberships over 6 people in the home, \$50/person	\$
Nanny membership add-on \$50	\$
Membership Add-Ons (Guest Passes, Additional Membership	Card) \$
Service Fee if paying via PayPal (to NobHillSwimClub@gmail.	com): 3% of all fees \$
	Total \$
On occasion Nob Hill Swim Club (RAIA) takes photographs and/or video of members are present. These photos and video segments are used strictly web. By signing the application form you authorize Nob Hill Swim Club (Figure members for this purpose. If you have questions or concerns about this print writing at nobhillswimclub@gmail.com . Your signature indicates that all family members listed on this Pool Rules, which can be found on the website.	ly for promotional purposes in print and on the RAIA) to use photos/video of you and your famil policy please contact the RAIA Board of Directo
Signature	Date
Please make ALL checks payable to Rolling Acres Improvement Assoc There is a returned check fee of \$40.00 for all returned checks. You may a NobHillSwimClub@gmail.com for a 3% service fee. If using PayPal, you address	also PayPal your total to

For office use only: Check received: _____ Check No.: ____ Amount: \$_____