

Membership Application:

Name:				
Email:			Phone:	
Current Address:				
City:	State:		Cell:	
Zip code:	Own Rent (circle one)		How long?	
SPOUSE INFORMATION				
Name:				
Email:			Phone:	
CHILDREN				
Name:	DOB:	Name:		DOB:
Name:	DOB:	Name:		DOB:
Name:	DOB:	Name:		DOB:
EMERGENCY CONTACT				
Name:				
Address:			Phone:	
City:	State:		Zip code:	
Relationship:				
References				
Name:	Email:		Phone:	
1.				
2.				
VOLUNTARY SKILLS AVAILABLE (How can you help?)				
I have read and agreed to the LRC BY-LAWS and Park and Pool rules.				
Signature:			Date:	