Lantern Ridge Swim and Racquet Club

PO Box 170547 Spartanburg, SC 29301 (864) 574-2676 (seasonal number)

Application for Membership

Please complete the application in its entirety.

Heads of Household		
First name:	First Name:	
Middle initial:	Middle initial:	
Last name:	Last name:	
Nickname/name you go by:	Nickname:	
Cell phone:	Cell phone:	
Email:	Email:	
Employer:	Employer:	
Work Phone:	Work Phone:	
Home Phone:	Home Phone:	
Home		
Address:	City/Zip:	

Please list all immediate family members here, including the heads of household above. Memberships are ideally limited to those family members you claim on your taxes, and/or those that live with you full-time. You may bring guests with your to the pool. Guest fees of \$3/per person will be collected upon sign-in.

Immediate Family Members		
Name:	Birthday:	

How did you hear of Lantern Ridge Pool? _____

Is there one family that recruited you and/or encouraged you to apply for membership?______

If yes, please state the name of that person/family here:______

Membership fees are \$400 per family. An "Empty Nest" membership is available for Heads of Household who no longer have children in the home. The fee for the Empty Nest membership is \$250. We have an individual membership for single members of \$150.

Lantern Ridge has Summer Swim Team. The children of both members and non-members are allowed to swim on the team. Different rates apply, as pool members receive a discount. Please email <u>lanternridgepoolspt@gmail.com</u> to be connected to the swim coach.

Membership options/fees	
First Year NEW MEMBER FAMILY DISCOUNT	\$350 (\$400 after the first year)
Family Membership	\$400
Empty Nest (couple)	\$250
Individual Membership (single)	\$150

Parties: The pool can be rented for parties (both members and non-members). You can contact us at **lanternridgepoolspt@gmail.com**

Waiver/Release of Liability

Lantern Ridge Swim and Racquet Club

Please read carefully before signing. This is a release of liability and waiver of certain legal rights.

I,_____, the participant and/or parent/guardian of the above named individual(s), agree and understand that swimming is a HAZARDOUS activity. I recognize that there are risks inherent in the sport of swimming, including but not limited to paralyzing injuries and death.

The participant and/or parent/guardian hereby agree to participate in the Lantern Ridge Swim and Racquet Club/swim team and hereby agree to indemnify and hold harmless the Lantern Ridge Swim, and Racquet Club and the Spartanburg Summer Swim League, its directors, agents, employees, officers, and coaches against any liability resulting from any injury that may occur to the participant while participating in the Lantern Ridge Swim and Racquet Club and/or swim team. The participant and/or parent/guardian also agree to indemnify the Lantern Ridge Swim and Racquet Club for any damages incurred arising from any claims, demand, action or cause of action by the participant parent/guardian.

The participant and/or parent/guardian authorize any representative of the Lantern Ridge Swim and Racquet Club to have the participant treated in any medical emergency during their participation in any Lantern Ridge Swim and Racquet Club event, daily swim, swim meet, swim team practice, or team gathering. Further, the participant and/or parent/guardian agree to pay all costs associated with medical care and transportation for the participant.

I have noted on the bottom of this form any medical/health problems of which the staff should be aware.

I have carefully read the above application and LIABILITY RELEASE and sign it with full knowledge of its contents and significance.

Signed:	Date:
Printed Name:	Phone:

MEDICAL/HEALTH PROBLEMS OF WHICH THE STAFF SHOULD BE AWARE: (list on back)