

2024 Membership Application www.blackridgeswimclub.org

Name:			Today's Da	te:		
Address			Phone number:			
			_ Phone Num	ıber (secondar	y):	
Email(s):						
	member of the hous above stated residen					immediate family
Name:	Relationsh		hip:		Age:	
	Name:				ationship:	
	Age:					
Relationship:			Age:		Name:	
	Relationshi					
Name:	R					
				_ Rela	ationship:	
	Age:					
Check desired me	mbership and circle the	ne amou	int paid			
_	_ Single Member \$3	00				
	Two-Member Househo	old \$400				
_	Three Member House	hold \$50	0			
_	Core Household \$500					
_	Evening/Weekend \$40	00				
_	Senior Household \$27	'5				
Caregiver "Plus" Membership				\$	50	

Caregiver "Plus" Membership covers a caregiver that accompanies another paid BSC membership (purchased in addition on to an existing membership). All membership levels include two guest passes.

Rules and Policies for Membership

1. Only those living in one household who are immediate family members may join under one membership.

2. No child under the age of 12 is permitted in the pool or the facilities unless accompanied by an adult,

sibling or babysitter that is at least 14 years of age or entering the 9th grade.

- 3. All pool rules must be adhered to. Membership of the BSC is a privilege, not a right. BSC Board of Directors reserves the right to reject any membership application.
- 4. Members who wish to join the Swim Team must join at the First Year, Second Year, Core, or Two Person Household membership levels.
- 5. Full list of BSC policies and by-laws available upon request.

Blackridge Civic Association Membership

We are a partner organization of the Blackridge Civic Association (BCA). The BCA maintains the grounds, parking lot, and playground. They also host annual events for families. For more information or to get on the BCA mailing list, visit <u>https://blackridge-bca.org/</u>

All pool members are required to join the BCA. The cost to join the BCA is \$50.00.

Please check one of the following:

____ I have already paid my 2024 BCA membership ____ I am enclosing my 2024 BCA membership fee of \$50

Please return the following items to: Membership Coordinator Blackridge Swim Club P.O. Box 17102 Pittsburgh, PA 15235

- 1. Completed 2024 BSC membership application and check for the total amount shown above to the Blackridge Swim Club.
- 2. Completed BCA form and a separate check payable to Blackridge Civic Association for \$50.

For further information, or questions, email us at <u>membership@blackridgeswimclub.org</u>

Membership Office Only:

Info on file_____ Recorded on XLS_____ Amount Paid _____ Form of Payment _____ Check No. _____