

THE GATEWAY HEIGHTS CLUB, INC

P.O. Box 284 Monroeville, PA 15146

2017 Application for Membership

We, the undersigned, hereby submit our application for membership in The Gateway Heights Club, Inc., and agree that we will abide by the rules, regulations, and by-laws of the Gateway Heights Club. Membership fees for this season are:

- \$299 per family (\$249 for first time members)
- \$229 for adult plus one limited family
- \$199 for adult individual

There is an additional volunteer deposit of \$50.00 as a separate check. Upon completion of 4 hours of activity toward a club fundraiser (work that directly offsets Club costs in that amount, or an activity that assists in some other way) the Board agrees, your check of \$50.00 will be returned to you.

Desired Membership Type: FAMILY LIMITED FAMILY INDIVIDUAL

Family Name _____ Home Phone _____
Address _____ City _____ Zip _____
e-mail address _____

Primary Adult Name _____
Employer _____ Work Phone _____ Cell _____

Secondary Adult Name (must be from same household) _____
Employer _____ Work Phone _____ Cell _____

Other Members' Names & Ages (must be from same household):

How did you learn about Gateway Heights? (Please check one.)

Member: Name: _____

Ad: Sign: Attended Fundraising Event: Visited Pool

Volunteer Interests (circle all that apply)

Board Concessions Sports Social Grounds Construction

Other _____

Signature of Applicant Date

Signature of Spouse Date

Total Due (membership minus any applicable discount): \$ _____

Please include a separate check for your refundable volunteer deposit.

Please make checks payable to: Gateway Heights Club, Inc.

And mail them to: P.O. Box 284, Monroeville, PA 15146