



MAPLE SPRINGS SWIMMING ASSOCIATION

Home of the SeaDogs Swim Team

2024 Stock Membership Application / Dues Form



For the 2024 Season, we are offering these easy payment options for our stockholders.

EARLY BIRD: Pay by check or credit card by April 15th and receive an early bird discount.

REGULAR PAYMENT: Pay in full between April 16th and May 24th

PAYMENT PLAN: Enroll in February for 5 convenient payments. We accept check or credit card. Be sure to provide an email address for processing. For credit card payments provide all the appropriate information on the back of this form. If paying by check, please mail 5 checks (one for each month) from February to June and mail them with this form. Custom payment plans are available if started later. All payment plans must be paid in full by June 15th.

FAMILY RATES (INCLUDE UP TO 6 HOUSEHOLD MEMBERS – CHILDREN 5 AND UNDER ARE INCLUDED IN FEE)

TYPE	RECEIVED BY	COST
Early Bird	April 15 th	\$410
Payment Plan	Feb, Mar, Apr, May, and Jun 15 th	5 payments of \$90
Regular Payment	April 16 th to May 24 th	\$430
Late	After May 25 th	\$450

ADULT COUPLE

TYPE	RECEIVED BY	COST
Early Bird	April 15 th	\$285
Payment Plan	Feb, Mar, Apr, May, and Jun 15 th	5 payments of \$64
Regular Payment	April 16 th to May 24 th	\$300
Late	After May 25 th	\$330

ADULT SINGLE

TYPE	RECEIVED BY	COST
Early Bird	April 15 th	\$245
Payment Plan	Feb, Mar, Apr, May, and Jun 15 th	5 payments of \$55
Regular Payment	April 16 th to May 24 th	\$265
Late	After May 25 th	\$280

STUDENT SINGLE (12-18 YEARS) or SENIOR (ages 55+) SINGLE

TYPE	RECEIVED BY	COST
Early Bird	April 15 th	\$225
Payment Plan	Feb, Mar, Apr, May, and Jun 15 th	5 payments of \$52
Regular Payment	April 16 th to May 24 th	\$250
Late	After May 25 th	\$265

PAYMENT PLAN MUST BE PAID IN FULL FOR MEMBERSHIP TO BE VALID. PAYMENTS ARE NON-REFUNDABLE

2024 Stockholder's Dues Form

Stockholder's Name: _____ Stock #: _____

Mailing Address: _____

Home Phone: _____ Cell Number: _____

Email Address: _____

Emergency Contact Name & Number: _____

Name: (PLEASE PRINT)	Relationship:	AGE:
1	Stockholder	
2		
3		
4		
5		
6		
Name: (PLEASE PRINT)	Additional:	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
	Household Member \$30	
	Household Member \$30	
	Babysitter (Free w/Family)	

*Note: Family members on a membership **MUST** live in the same house. **No exceptions.**

*Note: Babysitters are at no additional cost but may only come to the pool with the member's child(ren).

Please choose your payment option:

Type: Family Adult Couple Adult Single Student Single

Plan: Early Bird Payment Plan Regular Late Payment

TOTAL DUE: \$ _____ (see reverse side for details)

Please make all checks payable to **Maple Springs Swimming Association**

Paying by Credit Card – complete all the information below

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until membership payments are paid in full. Card Type: MC Visa AMEX DISCOVER

Cardholder Name (as shown on card): _____

Card Number: _____ Exp Date: (mm/yy) _____ CVV: _____

I, _____, authorize Maple Springs Swimming Association to charge my credit card above for agreed purchases. I understand that my information will be saved to file for future transaction for payments due on my account.

Customer Signature Date

PLEASE MAIL COMPLETED FORMS TO:
Maple Springs Swimming Association, Attn: Membership, P.O. Box 114, Birdsboro, PA, 19508

QUESTIONS, PLEASE FEEL FREE TO CONTACT US:
Phone: 610-780-9862 / Email: MapleSpringsCommunityPool@gmail.com