

Coppermine Swim Club
690 Foothill Rd
P.O. Box 6162
Bridgewater, New Jersey 08807
Attn: Membership
908-685-9596

APPLICATION FOR LONG-TERM GUEST PASS

The undersigned agrees upon acceptance that the applicant will abide by the By-Laws, and Rules and Regulations of Coppermine Swim Club. In addition to this form, an Emergency Contact Form must be completed prior to including guest on bonded family's membership.

NAME OF GUEST: _____ DATE OF BIRTH: _____

NAME(S) OF PARENT(S) OR GUARDIAN(S): _____

ADDRESS: _____

Email Address: _____ Phone number: _____

SIGNATURE OF PARENT OR GUARDIAN

DATE

NAME OF SPONSORING BONDED HOST FAMILY: _____

SIGNATURE OF SPONSORING HOST FAMILY MEMBER

DATE

Before Mailing.....

- Make check for \$100 payable to: Coppermine Swim Club
- Attach completed Emergency Contact Form
- Mail completed forms check to :
Coppermine Swim Club, P.O. Box 6162, Bridgewater, NJ 08807