CCE RECREATION CLUB, INC d/b/a CENTENNIAL RECREATION CLUB

Membership Application Date _____ Member #_____

Name_____
last first middle

Spouse_____
last first middle

Address_____

City_____ State_____ Zip _____

Home Phone (_____)_____ Cell Phone (_____)_____

Employer_____ Work Phone (_____)_____

Address_____ City _____ State_____ Zip _____

Spouse Employer_____ Work Phone (_____)_____

In case of emergency at the pool, in addition to the above numbers, please provide the following:

_____
Name relationship phone

_____
Name relationship phone

CHILDREN LIVING AT HOME CONSIDERED MEMBERS UNDER THIS APPLICATION (Children over 21, unless in college and living at home, are not considered members of this application. They must obtain their own membership.)

1._____ relationship _____ birthdate_____

2._____ relationship _____ birthdate_____

3._____ relationship _____ birthdate_____

4._____ relationship _____ birthdate_____

5._____ relationship _____ birthdate_____

Upon acceptance of this application by the Centennial Recreation Club, the undersigned agree to accept the Club's Membership Agreement and understand that they will be required to pay annual dues and assessments.

_____ _____
Member signature date Member signature date

Email address _____ Key _____

Stock Certificate #_____ Effective Date_____ Fees paid $_____

Transferred from _____ Stock Cert. #_____