LAKE MARIE VALLEY CLUB

A NonProfit Corporation registered in the State of California.

Membership Application

Last Name: _____	First Name _____
Street Address: _____	City/State/Zip _____
Email Address: _____	Phone: _____
Own Home: yes _____ no _____	Place of Employment: _____
Spouse/Partner Last Name: _____	Spouse/Partner First Name: _____
Lives at Same Address: yes _____ no _____	Phone: _____
Email Address: _____	Place of Employment: _____

Children/Grandchildren under the age of 25 residing in the home:

_____ Birthdate: _____

_____ Birthdate: _____

_____ Birthdate: _____

_____ Birthdate: _____

Type of Membership: Equity* Limited Limited/Associate**

***All Equity members must be homeowners in Lake Marie Estates. **All Limited/Associate Members must be residents of Lake Marie Estates.**

I agree to all conditions, bylaws, and rules of the Lake Marie Valley Club. I acknowledge all memberships must be approved by the Board of Directors and have a six-month minimum obligation. I acknowledge that all dues assigned by the Board are due quarterly and in advance.

Applicant Signature: _____ Date _____

Applicant Signature: _____ Date _____

Director Signature: _____ Date _____

Director Use Only

Initial Fee $_____	**Paid Through: _____**	**Bylaws Sent: Yes/No**
Prepaid Dues $_____	**Check No. _____**	**Key Assigned: Yes/No**
Total Paid $_____	**Indemnification Signed: Yes/No**	**Pool Rules Sent: Yes/No**