

Monte Sano Club, Inc.
Application for Summer Permit, 2017

Name: _____

Phone No(s): _____

Spouse: _____

Address/Zip Code: _____

Email Address: _____

Place of Employment: _____

List household members who will use the pool. (If they are minors, please give the month and year each child was born.)

Emergency Point of Contact: _____

Phone Number(s): _____

Personal References (2) (Preferably Monte Sano Club Members):

Member Endorsement (1) (Must be Monte Sano Club Member):
