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**Application Authorization**

*I, the undersigned hereby make application for membership to the Indian Pond Pool Club and understand that this application is subject to approval of the ownership.*

*My seasonal dues of \$ \_\_\_\_\_ is due at the time I submit my application to the Pool Club.*

**Upon acceptance, I agree to abide by the By-Laws and Rules of Conduct of the Indian Pond Pool Club. Application is not valid unless signature is complete.**

**Outside food & drinks and or coolers are prohibited!**

**Swim Diapers must be worn by all children who are not toilet trained.**

**\*\*\*IF POOL POLICES ARE NOT OBSERVED, MEMBERSHIPS WILL BE REVOKED WITHOUT REIMBURSEMENT OF DUES\*\*\***

MC / Visa / Discover / American Express \*\* A Convenience fee will be charged from the service provider\*\*

Credit Card # \_\_\_\_\_

Cash

Check

Exp. Date \_\_\_\_\_

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Signature of Applicant

Date

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Signature of Spouse

Date

Please forward this application along with the seasonal dues to the following:

**\*\*\*PLEASE NOTE ONCE PAYMENT IS RECEIVED IT IS NON REFUNDABLE\*\*\***

**Indian Pond Reserves the right to make changes to fees and policies!!**

Indian Pond Country Club  
60 Country Club Way  
Kingston, MA 02364  
Attn: Pat Fleming Accounting  
781-585-9117 ext 108

**For Office Use Only**

Application Received \_\_\_\_\_ and was accompanied with payment in the amount of \$ \_\_\_\_\_

Type of Membership Applied For \_\_\_\_\_ Check# \_\_\_\_\_

Member # \_\_\_\_\_ Date Effective: \_\_\_\_\_