



FOREST RIDGE COMMUNITY CLUB

Full Membership Application

Last Name: _____ Husband: _____ Wife: _____

Address: _____

Phone #: _____ Email Address: _____

Emergency Phone #: _____ Emergency Phone #: _____

Child #1 Name: _____ Child #1 DOB: _____

Child #2 Name: _____ Child #2 DOB: _____

Child #3 Name: _____ Child #3 DOB: _____

Child #4 Name: _____ Child #4 DOB: _____

Child #5 Name: _____ Child #5 DOB: _____

Non-Refundable Initiation Fee: \$ 125.00

Bond Payment: \$ 375.00

Annual Dues Payment: \$ 415.00

Total Due: \$ 915.00

I verify that the above information is correct:

Applicant Signature: _____ Date: _____

How did you hear about FRCC? _____

If referred by current member who?: _____

Mail Application and check payable to FRCC to:
Karen Muncey
MEMBERSHIP DIRECTOR - Forest Ridge Community Club
23 Aldwick Rise
Fairport, New York, 14450