



2009 Membership Application
[ALL MEMBERS OF THE HOUSEHOLD MUST BE LISTED]

Adult(s):

Full Name _____ Date of Birth _____ Profession _____

Full Name _____ Date of Birth _____ Profession _____

Home Address _____ Zip code _____

Dependent(s):

Full Name _____ Date of Birth _____

Full Name _____ Date of Birth _____

Full Name _____ Date of Birth _____

Full Name _____ Date of Birth _____

Phone Number(s) and e-mail:

Home: _____ Work: _____ Emergency or Cell: _____

Email Address _____

Sponsors:

(Applications require two sponsorship letters to be completed and submitted with the application or ask Sponsors to submit an email to LGRA.)

(1) _____ (2) _____
(print) (print)

I hereby make application for membership in Lewis Ginter Recreation Association, Inc. I agree to pay all fees and dues and agree to abide by the corporation's By-Laws and Rules & Regulations.

Applicant's Signature: _____ **Date** _____

Co-Applicant's Signature: _____ **Date** _____

Please return completed form along with Initiation Fee and Dues to:

Lewis Ginter Recreation Association, 3421 Hawthorne Avenue, Richmond, Virginia 23222

ALL INFORMATION WILL REMAIN CONFIDENTIAL

PHONE 804-321-1659
E-MAIL LGinterRecAssoc@verizon.net
Website www.LewisGinterRecreationAssoc.org