

2025 APPLICATION FOR NEW FULL-TIME MEMBERSHIP
RIVER EDGE SWIM CLUB, INC.

Please complete all the information below once we have received it, along with your membership type payment and bond payment of \$589.94. **Bond payment MUST accompany dues payment.** Make checks out to "River Edge Swim Club. Please circle your choice of Plan. The price below includes Bond fee

Family Plan 3+	Family Plan 2	Family Plan 1
\$1480.26	\$ 1463.20	\$ 1439.73
NJ State Sales Tax is included in the price above.		

Bond Holder Name _____

BH Occupation _____

Bond Holder Spouse/Partner _____

Spouse/Partner Occupation _____

Address _____

Town/State/Zip _____

Home Phone _____

Bond Holder Cell Phone _____

Spouse/Partner Cell Phone _____

Email Address _____

Additional Email Address _____

User Id you'd like to use for Community Pass _____

DOB _____

DOB _____

PLEASE NOTE: We reserve the right to request proof of any information submitted on this form.

Photo ID membership cards are required to enter the pool daily. Pictures taken must view your face; sunglasses and hats are prohibited. The picture will be taken on the first day you enter the club grounds.

Membership cards will be used yearly. New IDs cost \$10.40 per card.

All guest passes and pool events must be paid for by credit card; there are no exceptions.

1) List all children under 25 who permanently and legally reside with you;

Name	Relationship to Head of Household	Grade	Month	Date of Birth Day	Year
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

2) List other relatives or individuals who permanently and legally reside with you. There will be an additional fee of \$200.00 per adult of child

Name	Relationship to Head of Household	Grade	Month	Date of Birth Day	Year
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

3) Babysitter, there is an additional fee of \$200.00 per sitter.

Name	Month	Date of Birth Day	Year
_____	_____	_____	_____
_____	_____	_____	_____

Mail to;
 River Edge Swim Club
 Attn: Business Manager
 600 Riverside Way
 River Edge, NJ 07601

 Legal Signature, Bondholder (Only one)

 Date

PLEASE NOTE: applications will not be processed without full payment. For any questions or concerns, contact the Business Office at businessoffice@reswimclub.org