

Card No. _____

ONDULANDO CLUB MEMBERSHIP APPLICATION

_____ Last Name/First Name _____ Spouse Last Name/First Name _____

do hereby apply for membership to the Ondulando Club.

Address: _____ Ventura, CA _____ Zip Code _____

Phone: _____ Cell Phone (optional) _____

Email address: _____

Please list name and birth year for each child that resides in your home:

- (1) _____ (4) _____
- (2) _____ (5) _____
- (3) _____ (6) _____

Referred to our Club by a **Certificate** Member: _____

Certificate Member [] Social member []

Initiation Fee (non-refundable) \$ _____

Quarterly Amount Due \$ _____

For period: January-March April-June July-September October-December

Total Due \$ _____

We declare that we are the sole owners of said property above (for certificate members only) and that this application must be approved by the Board of Directors of the Club. After approval, I/we will have all rights and privileges as prescribed in the articles of incorporation, by-laws, and amendments.

By signing below, I, my family, and guests agree to abide by the rules for the use of the Ondulando Club at all times while on Club property. I also agree to waive all legal claims against the Ondulando Club for any injury or damage that I, my family, or my guests may incur during or as a result of our participation in recreational, social, and other guest related activities at the Ondulando Club.

Dated _____ Signature _____

Dated _____ Signature-Spouse _____

DATE BOARD APPROVED _____

ACCEPTED BY _____