



# Membership Form

*Please print clearly.*

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City / Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

(Family memberships) Family names and birthdates that will use facility: \_\_\_\_\_

\_\_\_\_\_

## CHECK ALL THAT APPLY

- FAMILY MEMBERSHIP - \$40.00 monthly**  
Family membership includes 2 adults and children through the age of 18 residing in the same household.
- SINGLE MEMBERSHIP - \$25.00 monthly**
- SENIOR MEMBERSHIP - \$18.00 monthly**  
Senior is anyone over the age of 60
- ANNUAL FAMILY MEMBERSHIP - \$480.00 annual**  
Family membership includes 2 adults and children through the age of 18 residing in the same household.
- ANNUAL SINGLE MEMBERSHIP - \$300.00 annual**
- ANNUAL SENIOR MEMBERSHIP - \$216.00 annual**  
Senior is anyone over the age of 60
- COLLEGE MEMBERSHIP - \$35 annual**  
For those going to College and not living at home, good for summer, fall, spring and winter break
- JOINER FEE - \$30.00 one time charge**
- AUTO PAY – include completed form and voided check**

My signature below shows I have read and will uphold BWC Rules & Regulations. (separate sheet)

Signed \_\_\_\_\_

Office use only: Check # \_\_\_\_\_ Check Amount \_\_\_\_\_ Check Date \_\_\_\_\_  
Cash Amount \_\_\_\_\_ Cash in date \_\_\_\_\_  
Keycard # \_\_\_\_\_