



WILLOW OAKS



Willow Oaks Recreation Association – A Covenant Community • www.willowoaks.org

2018 RESIDENT MEMBERSHIP AGREEMENT

Please **neatly** print your name and address as you would like it to appear in the neighborhood directory.

Name(s) _____

Street Address _____

Phone _____

E-mail _____

PLEASE NOTE:
The Basic Membership Fee increased to \$60 to meet the increased cost of managing our neighborhood.

I wish to opt out of receiving a paper version of the newsletter.

I DO NOT wish to be listed in the neighborhood directory.

Please provide your e-mail address so WORA can inform you of neighborhood events and news.

BASIC MEMBERSHIP ONLY

Use this section if you are NOT joining the pool and want to be a member in good standing for 2018.

Basic Membership \$ **60.00**

Donations**

Beautification \$ _____

Pool \$ _____

Other _____ \$ _____

TOTAL \$ _____

Basic Member Signature _____

Date _____

Make membership checks or money orders payable to WORA. NO CASH WILL BE ACCEPTED.

POOL MEMBERSHIPS

BY APRIL 30

AFTER APRIL 30

Family Plan (up to six) or **Grandparent Plan**

\$ 170.00 \$ 195.00

Additional family members* \$ _____ \$ _____

Basic Membership \$ 60.00 \$ 60.00

Subtotal \$ 230.00 \$ 255.00

Single Adult Plan

\$ 130.00 \$ 155.00

Basic Membership \$ 60.00 \$ 60.00

Subtotal \$ 190.00 \$ 215.00

Donations**

Beautification or Pool \$ _____ \$ _____

TOTAL \$ _____ \$ _____

FAMILY PLAN MEMBERSHIP is available to residents. A family consists of up to **six** (6) family members who live in the same household on a permanent basis. *Additional family members, who reside in the home, may be added for \$25.00 per person.

GRANDPARENT PLAN MEMBERSHIP is available to residents in good standing and up to **four** (4) grandchildren. For details, see page 2 of this form.

SINGLE ADULT PLAN MEMBERSHIP is available to WORA residents in good standing who are **21 years of age or older**.

Any family members or grandchildren added after the original registration form is submitted, will be charged an additional \$25.00 per person. Daily guest passes are available for \$5.00 per person, per day.

The pool membership application continues on page two.

TAX DEDUCTIBLE DONATIONS

If you would like to make a tax deductible donation to WORA, you can through the Hampton Neighborhood Development Partnership (HNDP). Send us a **SEPARATE check made out to the **HNDP** with "Willow Oaks Recreational Association" and the purpose of the donation in the memo line.

POOL MEMBERSHIP, *continued*

FAMILY PLAN, GRANDPARENT or SINGLE ADULT PLAN POOL MEMBERSHIPS

Please print the **FULL NAMES** of **ALL** who are eligible for membership under the Family Plan or Single Adult Plan.

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Additional Family Members

Additional family members, **who reside in the home**, may be added for \$25.00 per person.

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name of child caregiver _____

(Child caregivers, pre-registered with the Membership Chairperson, may bring the member's children to the pool and swim during their hours of employment at no additional charge. They do not have full pool privileges.)

GRANDPARENT PLAN DETAILS

- The plan is designed for grandparents who have grandchildren visiting for the summer or who live in the area, but **do not** live in Willow Oaks. It includes up to two grandparents and four grandchildren under the age of 20.
- The grandparent plan cannot be used for grandchildren on the swim team. The Willow Oaks Swim Team (WOST) requires that the parent(s) or legal guardian(s) of swim team members join the pool.

I, the undersigned, agree to abide by and comply with the Willow Oaks by-laws, neighborhood covenants and all rules and regulations of the WORA pool. Pool rules can be found on the WORA website at www.willowoaks.org under the **POOL** tab.

Pool Member Signature _____ Date _____

Make check or money order payable to WORA.

There is a \$35.00 fee for all returned checks. Partial payments not accepted.

CASH PAYMENTS WILL NOT BE ACCEPTED.

*For tax deductible donations, write a **SEPARATE** check made out to **HNDP** with "Willow Oaks Recreational Association" and the purpose of the donation in the memo line.

To register, or for more details on the Willow Oaks Swim Team, go to willowoaks.swimtopia.com

**THE WILLOW OAKS
STINGRAYS** 

Please **MAIL** or **DELIVER** to: Brian Souder • Membership • 116 Wilderness Rd • Hampton, VA 23669

Forms can be left in the white Membership box on the front porch of 116 Wilderness Rd.

Questions or suggestions about membership?

Contact Brian Souder
at (757) 575-4282 or
membership.willow.oaks.org@gmail.com

Comments _____

Thanks for helping reach our membership goal of 100% participation!

Basic Membership is good from April 30, 2018 – April 30, 2019. You **must** pay Basic Membership to join the pool. **PAGE 2 of 2**