



Membership Application

P.O. Box 13,
Chelmsford, MA 01824
(978) 256-0120
www.russellmill.com

I, the undersigned, apply for Membership in Russell Mill Swim and Tennis Club, Inc.

Membership Type: Family Bonded Single Bonded
(check one)
 Family Seasonal Single Seasonal August

Member Name: _____

Spouse's Name: _____

Member Name: _____

Address: _____

City, State, ZIP _____

Phone(s): _____

Email(s): _____

Child Name: _____ D.O.B: ____/____/____

Child Name: _____ D.O.B: ____/____/____

Child Name: _____ D.O.B: ____/____/____

Child Name: _____ D.O.B: ____/____/____

Child Name: _____ D.O.B: ____/____/____

Child Name: _____ D.O.B: ____/____/____

The undersigned & each family member agree to abide by the by-laws and published rules of the corporation, available on the website (www.russellmill.com)

Applicant's Signature

Date

Application & dues must be mail to RMSTC, P.O. Box 13, Chelmsford, MA 01824