

**Brookwood Swim & Tennis Club**  
**2024 Dues Payment Form (Existing Members)**

Date: \_\_\_\_\_

Bondholder Name(s): \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail Address(es): \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Type of Membership (please circle one):    **Family**                      **Two-Person**                      **Single**

Please list below the members who are eligible to use your bond. **MEMBERS MUST LIVE AT BONDHOLDERS' RESIDENCE.** You may purchase up to two \$30 babysitter passes, and he/she may accompany the child(ren) on the bond in the absence of the parent(s). You may purchase and add guest passes to your account in advance for \$5 each or pay at the time of the visit.

First Name	Last Name	Age (if over 21, list as "adult")
<b>Babysitter Pass Holder(s):</b>		

Item	Amount	Total
<b>2024 Membership Dues</b>	<b>Family</b> <span style="float: right;"><b>\$575</b></span>	<b>\$</b>
	<b>Two-Person</b> <span style="float: right;"><b>\$425</b></span>	
	<b>Single</b> <span style="float: right;"><b>\$340</b></span>	
<b>2024 Babysitter Pass(es)</b>	<b>Qty (up to 2):</b> <span style="float: right;"><b>@ \$30 ea</b></span>	<b>\$</b>
<b>2024 Guest Passes</b>	<b>Qty:</b> <span style="float: right;"><b>@ \$5 ea</b></span>	<b>\$</b>
<b>Grand Total</b>		<b>\$</b>

PLEASE RETURN BOTH PAGES WITH YOUR PAYMENT AND MAIL TO:

**Brookwood Swim & Tennis Club, Inc.**  
**P.O. Box 17682**  
**Ft. Mitchell, KY 41017**

—OR visit **brookwoodswimclub.com** and click the link at the top of the page to pay online—

**Payment Options:** Please check option below and provide information requested (info will be destroyed after use) or register online to set up an installment plan.

**Check Enclosed\*** Amt. Paid: \$  Check #/Date:

\*Payable to: Brookwood Swim & Tennis Club

**Charge My Credit/Debit Card** (complete section below and sign/date)

CREDIT CARD PAYMENT OPTION:  VISA  MasterCard

*Name - Exactly as It Appears on the Card*

*Credit Card Number*

*Security Code CSC#*

*Billing Address—Street, City, State & Zip Code*

*Card Expiration Date: MM/YY*

*This is the 3 or 4 digit security code appearing on the front or back of your card.*

---

**Signature**

---

**Date**

**Share the Brookwood experience! Receive a \$100.00 discount for EACH new bondholder you refer to the club (when they join and list you as their referral source).  
Discount(s) will be applied to your 2025 dues.**

**Follow us on Facebook to find out about upcoming events! Visit our website [www.brookwoodswimclub.com](http://www.brookwoodswimclub.com) for information about our Swim & Dive Team.**