



2004, 2013, 2014, 2016 Rocket City Swim League Champions

PRA TEMPORARY MEMBERSHIP APPLICATION FORM

Name:		Spouse:	
Children(s) Names & Ages:			
<i>* Please note: Children listed under a Family Membership are to be minors residing in your home only*</i>			
Address:			
Email Address:		Phone:	

TYPE OF MEMBERSHIP <i>(Please place an X to indicate type of membership)</i>					
	Family Membership (\$565)		Senior Membership (\$465)		Single Membership (\$365)

REFERENCES (PRA MEMBER IN GOOD STANDING)

1.

****Please include a copy of your Driver's License****