



Wilmington Park Homes Association

P.O. Box 30341
Savannah, GA 31410
Office: 912-897-3472
Pool: 912-897-1844
Email: info@wilmingtonpark.org
Facebook: Wilmington Park Pool

POOL REGISTRATION FORM

| | | |
|--------------|---------------|--------|
| Last Name | First Name | Spouse |
| Home Number: | Mobile Phone: | |
| E-mail: | | |
| Home Address | | |

Immediate Family Members First Name & Age (Please use a second page for additional family members)

| | | |
|---------|------|-----------|
| 1 Name: | Age: | Relation: |
| 2 Name: | Age: | Relation: |
| 3 Name: | Age: | Relation: |
| 4 Name: | Age: | Relation: |
| 5 Name: | Age: | Relation: |
| 6 Name: | Age: | Relation: |

Check our website at www.wilmingtonpark.org for the pool rules and regulations as well as additional pool information.

Please refer to the 2017 pool membership fee schedule

Pool membership fees enclosed with application: \$_____

I/we hereby agree to abide by the rules, regulations and safety instructions of the WHPA Pool

Signature: _____ Date: _____

Please make all checks payable to Wilmington Park Homes Association.
Please mail all applicable fees with completed application and photos to the address above.

IN CASE OF EMERGENCY CONTACT INFORMATION

| | |
|---------------------|-----------------------|
| Name: | Relation: |
| Mobile Phone: | Home Number: |
| Family Doctor: | Phone# |
| Preferred Hospital: | Special Health Needs: |