



*Progressive Pool Management, Inc.*

Quality Care for Commercial Pools

Waterview Swim Club  
2017 Single Child Membership  
Application (For Children Ages 12 – 17  
Only) Single Child Information

Name:

\_\_\_\_\_

Date of Birth:

\_\_\_\_\_

Parent/Guardian  
Name:

\_\_\_\_\_

Parent/Guardian Phone:

Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work:

\_\_\_\_\_

Parent/Guardian Address:

\_\_\_\_\_

Parent/Guardian E-mail:

\_\_\_\_\_

Sponsoring Family Information:

Family Name:

\_\_\_\_\_

Responsible Adult Name (Must be age 21 or older):

\_\_\_\_\_

Responsible Adult Phone:

Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work:

\_\_\_\_\_

Responsible Adult Address:

\_\_\_\_\_

Responsible Adult E-mail:

\_\_\_\_\_

I, \_\_\_\_\_, understand that I take full responsibility  
for the \_\_\_\_\_  
Sponsoring Adult

safety and actions of \_\_\_\_\_ while at the Waterview  
Swim \_\_\_\_\_  
Single Child

Club.

\_\_\_\_\_  
Signature of Sponsoring Adult Date

I, \_\_\_\_\_, understand that

\_\_\_\_\_  
Signature of Parent/Guardian Single Child

is under the supervision and responsibility of \_\_\_\_\_  
while at \_\_\_\_\_

\_\_\_\_\_ Sponsoring Adult  
the Waterview Swim Club.

\_\_\_\_\_  
Signature of Parent/Guardian Date

The application must be completed in full before being submitted for review.

Please return the completed application form and a check for \$175.00 payable to  
Progressive Pool Management, Inc. to:

Progressive Pool Management, Inc.  
1810 Philadelphia Pike  
Wilmington, DE 19809