

**GRAVES' MOUNTAIN LODGE**  
**2021 POOL MEMBERSHIP APPLICATION**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_ WORK PHONE #: \_\_\_\_\_ Cell# \_\_\_\_\_

Email Address \_\_\_\_\_

\_\_\_\_\_ FAMILY MEMBERSHIP – \$375.00 (Before April 23, \$335.00)  
\_\_\_\_\_ SINGLE MEMBERSHIP - \$125.00 (Before April 23, \$115.00)

**Membership includes traditional family of 6**  
**Add any additional members in your house or caregiver for \$20.00 each**

Mr. \_\_\_\_\_

Mrs. \_\_\_\_\_

Children in household up to 4 and \$20.00 for additional

- |          |           |  |
|----------|-----------|--|
| 1. _____ | Age _____ | Additional Members in household @ \$20.00 Each |
| 2. _____ | Age _____ | 5. _____ Age _____                             |
| 3. _____ | Age _____ | 6. _____ Age _____                             |
| 4. _____ | Age _____ | 7. _____ Caregiver                             |

\*\* My family and I have thoroughly read the swimming pool rules and regulations of Graves' Mountain Lodge, Inc. and agree to abide by these terms.

Signature \_\_\_\_\_

Date. \_\_\_\_\_

This form must be signed and returned with payment in full to Graves' Mt. Lodge by Friday, May 28, 2021 in order to be issued a membership

**Please mail to Graves Mountain Lodge, Attn. Missy Graves, Route 670, Syria, VA 22743**