

Wind Meadows Special Limited Membership Application

Please consider my application for Special Limited Membership at the Wind Meadow Leisure Center. I understand that this entitles me to the use of the common areas, including the Leisure center, pool, and tennis courts, for one year from the date of the signed contract. I also understand that I will be subject to the WMC Special Limited Membership Policy POL.007 and all rules and regulations that concern the use of the facilities as set forth by the Board of Directors of the Corporation.

I enclose my check in the amount of \$1860.00 for the membership fee set by the Board of Directors. I understand that this fee is non-refundable. I understand that failure to pay fees at the agreed-upon time will result in termination of membership with no refund of any payments made.

I understand the Board of Directors reserves the right to terminate Special Limited Membership at any time, without a refund of any fees paid by the member in question, should it be determined that said member has failed to comply with the applicable rules and regulations of the Corporation. Additionally, the Board of Directors reserves the right to refuse renewal of membership for any reason. I understand that Special Limited Membership is non-transferable. I agree to inform the Board of Directors of my intent to renew or terminate membership thirty (30) days before the renewal date.

NAME _____

ADDRESS _____ Zip _____

CITY _____

PHONE (home) _____ (business) _____

EMAIL _____

Members of my immediate family (children under 18 or full-time unmarried students up to age 25) who will be using the facilities include:

NAME

RELATIONSHIP

Signature

Date

Check payable to Wind Meadows. Check memo: WMC Special Membership
Mail form and check to: WMC, C/O WPI, 6939 Mariner Drive, Racine, WI 53406.