

FRAMINGHAM SWIMMING POOL ASSOCIATION, INC.
POST OFFICE BOX 2184
FRAMINGHAM CENTRE, MASSACHUSETTS 01703
fspa2184@juno.com



Date Submitted: _____

APPLICATION FOR POOL AND TENNIS MEMBERSHIP

Names of Applicants (include first and last names of both spouses where applicable)

Address _____

Phone _____ e-mail _____

Occupations _____

Names and birthdays of children:

Sponsoring Member Name:

(Attach letter from sponsoring member with application.)

1.

Names of Endorsing Members:

(Sponsoring member can help obtain necessary endorsements.)

2.

3.

4.

5.

Is the Applicant a former member of the Association? _____

If so, most recent membership date _____

Please have *four* letters of recommendation sent to:

F.S.P.A. (Membership)
P. O. Box 2184
Framingham, MA 01703

Or e-mail to: fspamembership@juno.com

If you have questions, please leave a message at 508-405-4125

CLUB USE ONLY

Approval of Board

Date approved: _____