



September 1, 2021

RE: Invitation for a three-plus Month Fall Pool Season membership for Associate Members

To all 2021 Shadow Brook Swim Club Summer Associate Members,

The Shadow Brook Swim Club [The Club] is continuing the program that was put in place over the past year. We are pleased to offer you our 2021 Fall pool season membership with completion of the attached Contract plus your check in the amount of \$180.00. The Fall Membership will be from September 7 to December 19, 2021.

Due to capacity constraints this opportunity will be **limited to the first forty (40) Associate Members** based on the USPS postmark date on your envelope and Board review and acceptance. We therefore recommend that you act promptly to complete and mail the enclosed contract, along with the \$180 membership fee, so that you and your immediate family can have access to the pool for this approximately two-month period. The \$180 fee will not be discounted should slots still be available and payment received after September 7, 2021.

Pool access is subject to COVID regulations and availability. Nevertheless, we intend to offer six lanes of lap swimming during the week and weekend (times below are subject to change, AQI, etc). Pool access lap swim hours are **limited to ages 18 and older**, as **no lifeguards will be on duty**. No reservations as usage will be on a first-come, first serve basis. We expect everyone to be good neighbors and share lanes if necessary. As a Summer Associate Member your immediate household members, age 18 or older, are entitled to use of the pool during all open hours with completion of the Fall Waiver form; each person, age 18 or older, must complete a waiver form.

- M-T-W-Th-F: 7 am – 2:30 pm * -- T-Th: 5:30-7:30 pm ** -- Sat. & Sun: 12 noon to 9 pm

* Pool cleaning is currently scheduled M-W-F from 5:30-7 am; this may change as the days get shorter

A secure magnetic gate system will allow access via a smartphone app. Each person will receive a personal unique code for access. **Any unauthorized use or sharing of access may result in immediate suspension.**

You will be bound by the privileges and restrictions stated in the Bylaws and the Rules and Regulations of the Swim Club. In particular:

- Associate Members have no voting rights and no participation in decisions of the Corporation
- Associate Members are not bound by the CC&Rs of the Corporation
- Associate Members shall be deemed members upon signing a contract with the Corporation and paying, in full, the Associate Fall Membership fee
- Associate Memberships are not transferable
- Associate Memberships shall be terminated, without reimbursement, for failure to comply with the Rules and Regulations of the Swim Club or at the direction of the Board of Directors
- Associate Members will need to complete and submit a Shadow Brook Membership & Waiver form

Please make your checks payable to **Shadow Brook Swim Club** and **mail the check with your completed and signed contract** to the address given at the bottom of this letter. Please list in the memo field “Shadow Brook 2021 Fall Membership”. Please also make a copy of documents submitted for your own records. Your cancelled check is your receipt.

If you have any questions or concerns, please email . . . vpool@shadowbrook.org

Mail Contract and Payment to: Shadow Brook Swim Club, P.O. Box 20271, San Jose, CA 95160

SHADOW BROOK SWIM CLUB

SBSC Record Locator – St. No & St. Name only

ASSOCIATE MEMBERSHIP CONTRACT – Fall 2021

This contract between Shadow Brook Swim Club, a non-profit corporation under the laws of the State of California, as a holder of an Associate Membership in the Shadow Brook Swim Club (hereafter the "Swim Club") entitles the below named person, his or her spouse, and their unmarried children permanently residing at the home of said person (the "Associate Member"), to the privileges of the Swim Club, subject to the Bylaws, Rules and Regulations of the Swim Club and such policies and rules as may be adopted from time to time (the "Policies"). Associate Member, and his or her Household, agrees to comply with Policies at all. Access is limited to Associate Members and their immediate household family. Associate Members and their family agree and understand that use of the pool and facility is done at their own risk and voluntarily enter into this Agreement. As an Associate Member, you agree to Hold Harmless and Indemnify the Swim Club, its Members and Board of any and all claims. Associate Members can access all pool rules and Policies via the website at www.shadowbrook.org.

This contract certifies membership for the 2021 Fall pool season, beginning September 7, 2021 and ending December 19, 2021. This contract is not transferable and is valid only for the above stated Fall season. This contract gives the Associate Member no voting rights in the Swim Club. This contract does not provide any rights of renewal for any subsequent swim season. The Policies are subject to change from time to time at the discretion of the Swim Club’s Board of Directors and Pool Staff. The Swim Club and/or Board of Directors may terminate this Contract, without any liability to Associate Member, in the event of a breach of this contract by Associate Member. This contract and the offer letter pursuant to which it was offered is the entire integrated contract between the parties.

This contract will be effective only when signed by Associate Member and has paid (and check has cleared) the \$180.00 fee and this contract has been accepted and signed by a duly authorized officer of the Swim Club. Please make a copy for your own record. A signed Pool Membership Waiver Form is required for Gate Security access and will be issued after the contract is signed, payment has been processed and forms submitted and accepted. Prior registration will NOT be required each time you wish to enter the pool facility.

Primary Last Name: _____ (for SBSC record purposes)

Primary First Name: _____

Secondary Name: _____

Home Address: _____ zip code _____

Primary Phone: _____ Secondary Phone: _____

Primary Email: _____ Secondary Email: _____

List all Household Family members (those under 18 should the program be expanded for under 18 access with an adult present): _____

Associate Member Signature _____ **Date:** _____

Club Acceptance Signature: _____ Name & Title: _____ Date: _____