



OCEAN PINES ASSOCIATION, INC MEMBERSHIP APPLICATION

OPA - 239 Ocean Parkway - Ocean Pines, MD 21811 Phone: 410-641-7717

OFFICE USE ONLY

_____ Renewing
 _____ New Membership

Batch No:
Date Entered:
Initials:

PLEASE PRINT:

Sec: _____ LOT: _____ OPA STREET ADDRESS _____

Adult Name _____ Mailing _____
 Adult Name _____ City _____
 _____ State _____ Zip _____
 E-MAIL _____ Phone _____

Family is 2 Adults living in the household and Dependent Children Ages 5-17 & College Student up to 22 with proof of college enrollment.

Please list names and date of birth.

1 _____	4 _____
2 _____	5 _____
3 _____	6 _____

PHOTO ID's FOR ALL MEMBERSHIPS REQUIRED - PLEASE CHECK MEMBERSHIP(S) DESIRED

GOLF

<input type="checkbox"/> (GF)	\$2300 Golf Family
<input type="checkbox"/> (GI)	\$1315 Golf Individual
Name of Individual _____	
<input type="checkbox"/> (CFF)	\$1900 Cart Package Family
<input type="checkbox"/> (CFI)	\$1300 Cart Package Individual
Name of Individual _____	
<input type="checkbox"/> (GANF)	\$1365 Golf Afternoon Family
<input type="checkbox"/> (GANI)	\$875 Golf Afternoon Individual
Name of Individual _____	
<input type="checkbox"/> (GJR)	\$225 Golf Junior (Age 16 and under)
Name of Individual _____	

RACQUET SPORTS

<input type="checkbox"/> (PBF)	\$260 Pickleball Family
<input type="checkbox"/> (PBI)	\$155 Pickleball Individual
Name of Individual _____	
<input type="checkbox"/> (PBJ)	\$55 Pickleball Junior
Name of Individual _____	
<input type="checkbox"/> (PTF)	\$260 Platform Tennis - Family
<input type="checkbox"/> (PTI)	\$155 Platform Tennis - Individual
Name of Individual _____	
<input type="checkbox"/> (TF)	\$435 Tennis - Family
<input type="checkbox"/> (TI)	\$270 Tennis - Individual
Name of Individual _____	
<input type="checkbox"/> (TANF)	\$165 Tennis Afternoon Family
<input type="checkbox"/> (TANI)	\$105 Tennis Afternoon Individual
Name of Individual _____	
<input type="checkbox"/> (TJR)	\$55 Tennis Junior
Name of Individual _____	
<input type="checkbox"/> (RCF)	\$625 Racquet Combo - Family
<input type="checkbox"/> (RCI)	\$400 Racquet Combo - Individual
Name of Individual _____	

SWIM

<input type="checkbox"/> (SFS)	\$325 Swim Family Summer
<input type="checkbox"/> (SFW)	\$460 Swim Family Winter
<input type="checkbox"/> (SFY)	\$600 Swim Family Yearly
<input type="checkbox"/> (SIS)	\$195 Swim Individual Summer
<input type="checkbox"/> (SIW)	\$300 Swim Individual Winter
<input type="checkbox"/> (SIY)	\$385 Swim Individual Yearly
Name of Individual _____	

REALTOR/OWNER BEACH PACKAGE

<input type="checkbox"/> (BUND6)	\$900 6 - Weekly Packages (permit + 4 pool passes)
<input type="checkbox"/> (BUND12)	\$1500 12 - Weekly Packages (permit + 4 pool passes)
<input type="checkbox"/> (ADD WK)	\$80 Add Week over 12 (permit + 4 pool passes)

PAYMENT METHODS

<input type="checkbox"/> Cash	
<input type="checkbox"/> Check	<i>There will be a \$35 fee for all returned checks</i>
<input type="checkbox"/> Debit Card	
<input type="checkbox"/> Credit Card	<i>credit card use will incur a 3.5% convenience fee</i>
Debit/Credit Card # _____	
Expiration Date _____	
V-Code _____	

BEACH PARKING

<input type="checkbox"/> (PPWM)	\$115 Beach Parking with Membership
	<i>must purchase swim, tennis, golf - does not come with pool cards</i>
	(Office Use Only: Permit # _____)
<input type="checkbox"/> (PPBPO)	\$215 Beach Club Parking & Pool (ONLY)
	with Photo ID Cards
	(Office Use Only: Permit # _____)
<input type="checkbox"/> (PPBDC)	\$215 Beach Club Parking & Pools
	with Pool Access Card
	(Office Use Only: Permit # _____)
<input type="checkbox"/> (PARKONLY)	\$165 Beach Parking Permit Only
	(Office Use Only: Permit # _____)

TOTAL \$\$: _____

ALL NEW MEMBERSHIPS MUST BE PICKED UP AT THE OPA OFFICE OR POLICE DEPARTMENT

All information above is true, complete and correct to the best of my knowledge and belief. Further I agree to obey and adhere to all established amenities rules and regulations

SIGNATURE: _____ DATE _____