

CUMBERLAND HILL SWIMMING POOL ASSOCIATION, LLC

1095 Rockbridge Rd.
Lexington, KY 40515

Charter Partner Membership Application

Name: _____

Family Names _____

Address: _____ City / State / Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

YES, I / We want to help the CHSPA, LLC. Please accept our contribution of:

_____ \$500 Charter Partner Level _____ \$1,000 (2 CPs)

_____ Other Amount (please specify) \$ _____

METHOD OF PAYMENT

_____ Check Attached _____ Paid online via website _____ Venmo

_____ Please send Invoice _____ Payment plan

PAYMENT PLAN OPTION:

- Send first payment amount of your choosing; then send 2, 3, or 4 installment payments.
- Your Charter Partner Membership will be confirmed after final payment.
- For questions: finance@cumberlandhillpool.com

TO SUBMIT YOUR PAYMENT:

Pay by check made out to: CHSPA

By Mail: CHSPA c/o Josh Lynch, 1095 Rockbridge Rd. Lexington, KY 40515

By Drop-box: Located at the Clubhouse on the front porch (1095 Rockbridge Rd)

TO PAY ONLINE:

Go to our Membership page – www.cumberlandhillpool.com/membership

Pay with a credit card via PayPal, right there on the web page.

Or pay with Venmo: Our handle is **@chspa** (under business). Please put "Charter Partner" in comments.

www.cumberlandhillpool.com