

COUNTRY CLUB ESTATES RECREATIONAL ASSOCIATION

2026 MEMBERSHIP APPLICATION

Send application and check or money order to CCERA, P.O. Box 142, Glen Burnie, MD 21060.

Questions? Contact: **John Boia** – (410) 360-5320 – membershipccera@gmail.com

Office Use Only

Check # _____

Rec. Date _____

Amount \$ _____

Photo Discl. _____

GENERAL INFORMATION

| Your Name (Head of Household) | | | | DOB: _____ | |
|--|---------------------------|------------------|--|---|----|
| Spouse, Significant Other (Co-Head of Household) | | | | DOB: _____ | |
| Address _____ | | | | | |
| City, State, Zip _____ | | | | | |
| Phone (head) | | | Email _____ | | |
| Phone (co-head) | | | Email _____ | | |
| Please provide an Emergency Contact: | | | | | |
| Name: _____ | | Phone: _____ | | Relationship: _____ | |
| Please select one membership package (see back for details): | | | | | |
| <input type="checkbox"/> Family <input type="checkbox"/> Couple <input type="checkbox"/> Single <input type="checkbox"/> I am a new member. <input type="checkbox"/> Pre-Senior <input type="checkbox"/> Senior <input type="checkbox"/> Boat-Launch I was referred by: _____ | | | | | |
| Please list all additional family members who reside in your household and will visit the pool: | | | | | |
| Name | Age as of May 23, 2026 | Date of Birth | Relationship | Interested in Swim Team? Family or Couple Required | |
| | | | | Yes | No |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| Please select any Guest Pass options: | | | | | |
| <input type="checkbox"/> I request # ____ five-day Guest Pass cards (add \$25.00 each). <input type="checkbox"/> I request a Seasonal Guest Pass for _____ (name) (add \$125.00). | | | | | |
| Please list any vehicles/trailers that you will drive into the Boat Launch area. | | | | | |
| <input type="checkbox"/> I request a Boat Ramp gate key (add \$5.00). | | | | | |
| Year/Make/Model: _____ | | | License Plate: _____ | | |
| Year/Make/Model: _____ | | | License Plate: _____ | | |
| If any check is returned by your bank, for any cause, you will be required to pay, in cash, the full amount of the dishonored check, along with a service charge of \$35.00. Additionally, future payments may be required to be made in cash or by money order. | | | | | |
| Early Bird Payment Option I am enclosing \$ _____ with this application. Full payment must be postmarked by January 31, 2026. If payment is not made by that time, I understand that I will be subject to the higher advertised rates. Membership materials will be available at the pool on May 23, 2026. Signature _____ | | | Photograph Disclaimer Photographs may be taken on CCERA property in which my image or the image of anyone listed on this Application may be used solely for promotional and/or advertising purposes. My signature signifies that I do not approve of this disclaimer. Signature _____ | | |
| I agree to abide by all Rules imposed by CCERA and the By-Laws followed by CCERA. I understand that a copy of the Rules and By-Laws will be provided at my request from any Board Member. CCERA is not responsible for any loss or theft of anyone's personal property on CCERA grounds. | | | | | |
| Applicant _____ | | | Date _____ | | |
| Co-Applicant _____ | | | Date _____ | | |

Payment: ___ Check ___ Cash ___ Credit Card

* If you wish to pay with a credit card, we will contact you via telephone.

Please note: **All credit card payments will include a 3.7% convenience fee.**

CCERA Membership Rates

| Membership Type | Family | Couple | Single | Pre-Senior Both Members Age 55-64 | Senior Both Members Age 65 & over | Boat Launch | Seasonal Guest Pass |
|--|----------------------------|----------------------------|----------------------------|---|---|-------------|---------------------|
| Paid in full by January 31 | \$560 | \$460 | \$325 | \$400 | \$340 | N/A | N/A |
| Paid in full by April 30 | \$630 | \$530 | \$355 | \$470 | \$410 | N/A | N/A |
| Full Price | \$680 | \$580 | \$380 | \$520 | \$455 | \$155 | \$125 |
| Membership Benefits | | | | | | | |
| Pool | ✓ | ✓ | ✓ | ✓ | ✓ | N/A | ✓ |
| Kiddie Pool | ✓ | ✓ | ✓ | ✓ | ✓ | N/A | N/A |
| Extra Guest Passes (incl. 5 visits) | \$25 or 5 hours of service | \$25 or 5 hours of service | \$25 or 5 hours of service | \$25 or 5 hours of service | \$25 or 5 hours of service | N/A | N/A |
| Pool Grounds | ✓ | ✓ | ✓ | ✓ | ✓ | N/A | ✓ |
| Hall Rental | Reduced Rate | Reduced Rate | Reduced Rate | Reduced Rate | Reduced Rate | N/A | N/A |
| Swim Team | Additional Fee | Additional Fee | N/A | N/A | N/A | N/A | N/A |
| Boat Launch | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | N/A |
| Voting Privileges | 1 or 2 (Must be 18) | 1 or 2 (Must be 18) | 1 | 2 | 2 | 1 | N/A |
| Referral Discount (2027 Membership) | \$70 | \$30 | \$15 | \$30 | \$30 | N/A | N/A |
| Can serve on CCERA Board | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | N/A |

Notes:

Family membership includes 1-2 adults and all children ages 3 and up (eligible for Swim Team participation), plus other members of household.

Couple membership allowed for 1 adult and 1 child under 18, also eligible for Swim Team participation.

Seasonal Guest Pass is intended for an accompanied guest who will visit the pool more than 25 times during the season.

All credit card charges will include a 3.7% convenience fee. All payments, of any kind, are non-refundable.