Rose Garden Pool Association, Inc. www.rosegardenpool.com

Wait List Application Form

The wait list is approximately a 3-5 year wait.

Family Last Name:			
First Name:			
Email:			
Cell:			
Spouse's First N	ame:		
Email:			
Cell:			
Home Address:			
Home Telephone	»:		
	Wait List Fee:	\$ 100.00	
You will receive	a brochure letting you know what	position you are on the wait list.	
Please contact A	ngela Ray at treasurer@rosegarde	npool.com with any questions.	
Please make che	cks payable to and mail to:	Rose Garden Pool Associ PO Box 832 McMurray, Pa. 15317-08	•