

Wait List Application Form

The wait list is approximately a 4-5 year wait.

Family Last Name: _____

First Name: _____

Email: _____

Cell: _____

Spouse's First Name: _____

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 Elizabeth Rush at membership@rosegardenpool.com or elizabeth.krall@gmail.com with any questions.

Please make checks payable to and mail to:

Rose Garden Pool Association, Inc.
PO Box 832
McMurray, Pa. 15317-0832