



Lakeside Field Club

Pool & Tennis

5 Brookside Lane, P.O. Box 397, North Salem, New York 10560
914.669.8477 www.lakesidefieldclub.com

Membership Application Form

Please complete this form and email it to lakesidebook@gmail.com.

Type of Membership (Family, Couple or Individual): _____

Name (Last, First & Spouse name): _____

Children (Names and birthdates): _____

Home Address: _____

Home Phone: _____

Email Address: _____

Employer/Position: _____

Work Telephone: _____

Mobile Telephone: _____

Spouse Email Address: _____

Spouse Employer/Position: _____

Spouse Work Telephone: _____

Spouse Mobile Telephone: _____

How did you learn about Lakeside: _____

(If referred by a member, please indicate ONE name only)

To be completed by Lakeside:

Date Received: _____