

**Belair Swim and Racquet Club**  
**Post Office Box 499**  
**Bowie, Maryland 20718**

---

**Request to Resign Membership**

Date: \_\_\_\_\_

Member's Name: \_\_\_\_\_

Phone : \_\_\_\_\_

Email: \_\_\_\_\_

To Membership Director,

I hereby authorize Belair Swim and Racquet Club, Inc. to accept my resignation from the Club. I relinquish all my rights as a member as per the Club's by-laws and I am under no further financial obligation to the Belair Swim and Racquet Club, Inc.. Furthermore, I understand that the Corporation will not be under any obligation to return any moneys to me.

Member's Signature: \_\_\_\_\_

For Club Use Only

Date Received \_\_\_\_\_

Membership # \_\_\_\_\_