



# OCEAN PINES - ASSOCIATE APPLICATION

OPA - 239 Ocean Parkway - Ocean Pines, MD 21811 Phone: 410-641-7717

OFFICE USE ONLY (2026-2027)

\_\_\_\_\_ Renewing  
\_\_\_\_\_ New Membership

Date Entered: _____
Initials: _____

**PLEASE PRINT:**

Adult Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Member ID # \_\_\_\_\_

Adult Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Member ID # \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_ Phone \_\_\_\_\_

**Family is 2 Adults living in the household and Dependent Children Ages 5-17 & College Student up to 22 with proof of college enrollment.**

**Please list names and date of birth.**

Name	Date of Birth	Name	Date of Birth
1 _____	_____	5 _____	_____
2 _____	_____	6 _____	_____
3 _____	_____	7 _____	_____
4 _____	_____	8 _____	_____

**PHOTO MEMBERSHIP CARDS ARE REQUIRED - PLEASE CHECK MEMBERSHIP(S) DESIRED**

### GOLF

(ASGF) \$2925 Associate Golf Family  
 (ASGI) \$1950 Associate Golf Individual

Name of Individual \_\_\_\_\_

(ASCF) \$2200 Cart Package Family  
 (ASCFI) \$1500 Cart Package Individual

Name of Individual \_\_\_\_\_

**Afternoon Memberships are after 12 pm**

(ASGAF) \$1800 Assoc Golf Afternoon Family  
 (ASGAI) \$1200 Assoc Golf Afternoon Individual

Name of Individual \_\_\_\_\_

(ASGJR) \$325 Associate Golf Jr (16 and under)

Name of Individual \_\_\_\_\_

(AGYP) \$1500 Assoc Golf Young Prof (under 35)

Name of Individual \_\_\_\_\_

### SWIM

(ASFS) \$605 Swim Family Summer  
 (ASFW) \$845 Swim Family Winter

(ASFY) \$1070 Swim Family Yearly  
 (ASIS) \$370 Swim Individual Summer

(ASIW) \$555 Swim Individual Winter  
 (ASIY) \$690 Swim Individual Yearly

Name of Individual \_\_\_\_\_

### RACQUET SPORTS

(ARCF) \$600 Assoc Racquet Sports Family

(ARCI) \$380 Assoc Racquet Sports Individual

Name of Individual \_\_\_\_\_

(ARCJR) \$95 Assoc Racquet Sports Junior

Name of Individual \_\_\_\_\_

### BEACH PARKING

(ASPARK) \$600 Beach Parking Permit Only  
Permit Number \_\_\_\_\_

(DBPP) \$50 Daily Beach Parkig Permit  
Date for Daily Permit \_\_\_\_\_

(PPWK) \$170 Beach Parking Weekly  
Date for Weekly Permit \_\_\_\_\_

**Hours of operation for all Ocean Pines amenities are contingent upon staff availability.**

**NO refunds or extended membership are given due to reduced hours.**

**Initials** \_\_\_\_\_

**Membership Seasons:**

**Yearly - May 1st to April 30th**

**Summer - May 1st to September 30th**

**Winter - October 1st to April 30th**

**TOTAL DUE:** \_\_\_\_\_

### PAYMENT METHODS

<input type="checkbox"/>	Cash	<input type="checkbox"/>	Check	\$35 return check fee	_____
<input type="checkbox"/>	Debit Card	_____	Debit/Credit Card #	_____	_____
<input type="checkbox"/>	Credit Card	_____	Expiration Date	_____	V-Code _____

All information above is true, complete and correct to the best of my knowledge and belief. Further I agree to obey and adhere to all established amenities rules and regulations

SIGNATURE: \_\_\_\_\_

DATE \_\_\_\_\_