



OCEAN PINES ASSOCIATION, INC MEMBERSHIP APPLICATION

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

OFFICE USE ONLY (2021-2022)

Renewing
 New Membership

Date Entered: _____
Initials: _____

PLEASE PRINT:

Sec: _____ LOT: _____ OPA STREET ADDRESS _____

Adult Name _____ Member ID # _____

Adult Name _____ 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 ID's FOR ALL MEMBERSHIPS REQUIRED - PLEASE CHECK MEMBERSHIP(S) DESIRED

GOLF

- (GF) \$2400 Golf Family
- (GI) \$1500 Golf Individual
- Name of Individual _____
- (CFF) \$2100 Cart Package Family
- (CFI) \$1400 Cart Package Individual
- Name of Individual _____
- (GANF) \$1650 Golf Afternoon Family
- (GANI) \$950 Golf Afternoon Individual
- Name of Individual _____
- (GJR) \$225 Golf Junior (Age 16 and under)
- Name of Individual _____

RACQUET SPORTS

- (PBF) \$280 Pickleball Family
- (PBI) \$170 Pickleball Individual
- Name of Individual _____
- (PBJ) \$55 Pickleball Junior
- Name of Individual _____
- (PTF) \$280 Platform Tennis - Family
- (PTI) \$170 Platform Tennis - Individual
- Name of Individual _____
- (TF) \$400 Tennis - Family
- (TI) \$250 Tennis - Individual
- Name of Individual _____
- (TANF) \$165 Tennis Afternoon Family
- (TANI) \$105 Tennis Afternoon Individual
- Name of Individual _____
- (TJR) \$55 Tennis Junior
- Name of Individual _____
- (RCF) \$625 Racquet Combo - Family
- (RCI) \$400 Racquet Combo - Individual
- Name of Individual _____

SWIM

- (SFS) \$325 Swim Family Summer
- (SFW) \$460 Swim Family Winter
- (SFY) \$600 Swim Family Yearly
- (SIS) \$195 Swim Individual Summer
- (SIW) \$300 Swim Individual Winter
- (SIY) \$385 Swim Individual Yearly
- Name of Individual _____

BEACH PARKING

- (PPWM) \$125 Beach Parking with another membership
(must purchase golf, swim, pickleball, platform, racquet sports, tennis, boat slip)
(Office Use Only: Permit # _____)
- (PARKONLY) \$200 Beach Parking Permit Only
(Office Use Only: Permit # _____)

TOTAL AMOUNT DUE: _____

PAYMENT METHODS

Cash Check *There will be a \$35 fee for all returned checks*

Debit Card Credit Card *Credit/Debit Cards will incur a 3.5% convenience fee*

Debit/Credit Card # _____ Expiration Date _____ V-Code _____

ALL NEW MEMBERSHIPS MUST BE PICKED UP AT THE OPA OFFICE OR POLICE DEPARTMENT

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 _____