



Application for Membership 2021 Season
COMMUNITY ASSOCIATION OF PROSPECT POINT
 www.cappbeach.com cappbeach@gmail.com
 PO Box 414, Lake Hopatcong, NJ 07849
 Beach address (NOT a mailing address): 2 Maine Street



Member Name (Last) _____ (First) _____

Prospect Point Street Address: _____

Mailing or Non-resident address: (if different) _____

Home Phone _____ Cell Phone _____

Email address _____


Total Number of occupants at residence _____ List names of all occupants and ages of children below:

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you need a dog permit for duck patrol? Yes No Breed of Dog _____ Color _____

Membership Dues (Check ONE)


Membership type	BY May,15 2021	AFTER May 15, 2021
<input type="checkbox"/> Senior Citizen (head of household >62 years old)	\$80	\$90
<input type="checkbox"/> Resident Family	\$200	\$250
<input type="checkbox"/> Non-Resident Family	\$250	\$300




2021 conditions (in addition to our standard rules and subject to change based on state requirements)

- Open to Jefferson Twp. residents only (prior members outside of Jefferson are grandfathered and permitted)
- Social distancing recommended, masks optional (except at Snack Shack where masks are mandatory)
- Marijuana smoking or vaping is not permitted on CAPP property
- Guests are limited to 5 per household membership

******MARK YOUR CALENDAR******



Opening Day Picnic is scheduled for Saturday, 06/12/2021 1:00 p.m. to 5:00 p.m.
 Band: D-Sauce and The Electric Monkey
 Membership Meeting at 3:00 p.m.



By submission of an application for membership to CAPP Beach, I agree that I have read the entire application and agree by its terms. I understand that I and my family members residing in the same household are considered stake-holders in CAPP Beach. As such, any activities on club property are considered At-Your-Own-Risk. I agree to abide by the rules set forth by the board of directors and that failure to abide by such rules may result in current and/or future loss of membership. I understand that no refunds are given on membership fees.

Member signature _____ Date _____

Please make **check or money order payable** to Community Association of Prospect Point **Mail to:** PO Box 414, Lake Hopatcong, NJ 07849

Office Use Only:
 Check # _____ Received _____
 Membership Initials _____

Office Use Only:
 # of Badges _____
 Badge Numbers _____