



# Karakung Swim Club

## Request for Bond Redemption/Membership Withdraw

Return This Form With The Bond To:  
KSC: PO BOX 812, Havertown, PA 19083

This completed form will be returned to you with a check if applicable.

BONDHOLDER NAME: \_\_\_\_\_ MEMBER# \_\_\_\_\_

BONDHOLDER CURRENT ADDRESS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

BONDHOLDER CONTACT PHONE #  
\_\_\_\_\_

REASON FOR REQUEST:  
\_\_\_\_\_

My ORIGINAL BOND CERTIFICATE or copy of such CERTIFICATE is enclosed with this signed request

(Please circle)      YES      NO

SIGNATURE OF BONDHOLDER \_\_\_\_\_

DATE \_\_\_\_\_

### KSC USE ONLY:

Consider this form proof of refund to above bond request

Check # \_\_\_\_\_ Dated \_\_\_\_\_

ORIGINAL BOND RECEIVED \_\_\_\_\_

COPY OF BOND RECEIVED \_\_\_\_\_

BOND/STOCK # \_\_\_\_\_

SIGNATURE OF CHAIRPERSON \_\_\_\_\_

DATE \_\_\_\_\_