



YMCA of the ROCKIES

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

Membership Application

I would like to start a NEW Membership
 I would like to RENEW my Membership (Membership # _____)

3 year membership (\$800) *\$100 savings

One-year membership (\$300)

Check (ck# _____)

Credit Card: Online at ymcarockies.org/membership OR
Call (888) 574-9622

Please write legibly so we spell your name correctly on your card! Thanks!

Membership includes you, a spouse/partner and any dependent children you have.

All Adults (age 18+) will be screened through the National Sex Offender Registry. Anyone who is on the National Sex Offender Registry list is immediately denied membership and is denied access to YMCA property and programs.

Staff Only
Cleared
NSOR

Primary Adult Name: _____ DOB: _____

Spouse/Partner Name: _____ DOB: _____

*Additional adults must be living in the same household as the Primary Member.

*Additional Adult Name: _____ DOB: _____

*Additional Adult Name: _____ DOB: _____

Mailing Address: _____

City/ State/ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Signature: _____ Date: _____

Please check here if you use the Nordic Center at Snow Mountain Ranch.

How would you like to receive your Membership Card?

Email Only

Postal Mail Only

Both Email and Postal

Please return this form to the Front Desk or to the Membership Office.

Mail: YMCA of the Rockies
Membership Office
PO Box 20800
Estes Park, CO 80511-2800

Fax: (970) 577-1257
E-mail: members@ymcarockies.org
Web: ymcarockies.org/membership
Phone: (888) 574-9622

Staff Name: _____ Department: _____ EPC/SMR Date: _____