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Board Approval Date: _____	

Colorado Hill Climb Association
 PO Box 687, Green Mountain Falls, CO 80819

2012 MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name:		
Mailing address:		
City:	State:	ZIP Code:
Phone:	Alt. Phone:	
D.O.B.:	S.S. no:	

Dues and Fees

General Membership Dues:	\$40		
Lifetime Member?	Circle: YES	<i>No Fee. Completed Application Required.</i>	Conf.
Competition License	\$10		
Co-Driver License	\$10		
Annual Competition Number:	\$10	Class:	Req. # Rec'd. #
Lifetime Competition Number:	\$50	Class:	Req. # Rec'd. #
Number on file?	Circle: YES	Class:	Current # Conf. #

TOTAL amount enclosed: \$

NOTES:

I agree to abide by the Rules, Regulations and By-laws set forth by the Colorado Hill Climb Association and represent the Club in a professional manner at all times.

Signature of applicant:	Date:
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