



Date _____

Ouray Hot Springs

Pool and Fitness Center Application

Primary Member

First Name (Please Print)	Last Name	M.I.	D.O.B. (MM/DD/YYYY)	Home #
Mailing Address	City	ST	Zip	Cell # (optional)
Physical Address	City	ST	Zip	Email Address

I am not interested in receiving a monthly online newsletter

Adult Add-On

Requirements:

- 1) 18 yrs of age and above
- 2) Must reside in the same household
- 3) Only one adult add-on per membership application

First Name (please Print)	Last Name	M.I.	D.O.B. (MM/DD/YYYY)

Youth Add-On

Requirements:

- 1) 4-17 yrs of age
- 2) Must reside in the same household
- 3) Maximum of four youth add-ons per membership application
- 4) Gym Users: Must be 15 years of age to use gym (under 18 requires a waiver)

First Name (Please Print)	Last Name	M/F	D.O.B. (MM/DD/YYYY)

First Name	Last Name	M/F	D.O.B.

First Name	Last Name	M/F	D.O.B.

First Name	Last Name	M/F	D.O.B.

Please initial below indicating that you have read and understood our rules and regulations:

- ____ Membership activation will begin upon payment.
- ____ Membership add-ons (members or amenities) cannot be added or changed after activation.
- ____ There will be a \$2 fee to re-issue lost or stolen loyalty cards.
- ____ There will be an additional charge of \$5 dollars to issue a gym card.

Primary Signature _____

Date _____

For Pool Staff Only

Resident <input type="checkbox"/>			Non-Resident <input type="checkbox"/>														
Primary			Adult Add-On			Youth 1			Youth 2			Youth 3			Youth 4		
P	G	P/G	P	G	P/G	P	G	P/G	P	G	P/G	P	G	P/G	P	G	P/G
3		12	3		12	3		12	3		12	3		12	3		12
Loyalty																	
Gym																	