



California Association of RV Parks & Campgrounds

MEMBERSHIP APPLICATION

Name _____

Main Contact _____
**if different from Name*

Address _____

City _____ State _____ Zip _____ County _____

Phone _____ Fax # _____

Email _____

MEMBERSHIP INVESTMENT <i>Rates Current January 1 - December 31, 2011</i>	
<input type="checkbox"/> Professional Membership - extended to those persons not currently park owners but who are currently, or who have been, active or interested in the RV park and campground industry. A professional member shall be liable for dues, but not for assessments and shall not be entitled to vote or hold office.	\$100.00

Please list your primary reason for joining CalARVC: _____

I first learned about CalARVC from: _____

PAYMENT OPTIONS	
<input type="checkbox"/> Check Enclosed - <i>Payable to CalARVC</i>	<input type="checkbox"/> Visa or MC
Card # _____	CVS: _____ Exp. _____
Name of Cardholder _____	
Billing Address: _____	Ziip: _____
Email Adrs for Receipt: _____	

Applicant's Signature: _____ Date: _____

Return to: CalARVC • PO Box 5648 • Auburn, CA 95604-5648 • (530) 885-1624 • fax (530) 823-6331