



# ROCKY MOUNTAIN SEA KAYAK CLUB MEMBERSHIP APPLICATION

All Rocky Mountain Sea Kayak Club memberships are renewed on March 31 regardless of the date you joined.



The Rocky Mountain Sea Kayak Club is an American Canoe Association's Paddle America Club. All RMSKC members must be registered members of the American Canoe Association (ACA). As an RMSKC-Paddle America Club member you have reduced ACA dues.

### DIRECTIONS:

1. Print the combined ACA Membership Form and Adult Waiver from the RMSKC Membership website. You will only need one per household to use as a membership application, but each person—adult or child—will need the appropriate one to use as their waiver.
2. Place an "X" in the most applicable of three boxes on the ACA Membership Form.
  - a. I am currently an ACA member
  - b. I would like a one-year Senior (62+) membership
  - c. I would like a one-year ACA Paddle America Club Membership (circle either individual or family)
3. Each person joining must read, complete and sign the Waiver & Release of Liability section of the ACA form.
4. Place an "X" in the appropriate boxes below.

ACA Dues \$ \_\_\_\_\_ (Fill in the amount due per the box selected on the ACA Membership form)

RMSKC Dues \$ 10.00

TOTAL DUE: \$ \_\_\_\_\_

RMSKC INDIVIDUAL MEMBERSHIP (18 + years old)

RMSKC FAMILY MEMBERSHIP (A family membership consists of all adults and children under the age of 18 residing in a household, regardless of relationship. In addition, all members of a household do not have to reside at the same address as in the case of children at college or children who live with another parent.)

5. Complete the following information, using the back if additional lines are necessary, for each person joining.

Full Name: \_\_\_\_\_ Age \_\_\_\_\_ ACA# \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Full Name: \_\_\_\_\_ Age \_\_\_\_\_ ACA# \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Full Name: \_\_\_\_\_ Age \_\_\_\_\_ ACA# \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ Mailing Address, if different: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Adult Signature: Print: \_\_\_\_\_ Sign: \_\_\_\_\_

6. Mail this form, the completed ACA waivers for EACH person, a completed ACA Membership Form, and a check for the Total Due made payable to RMSKC to: Rocky Mountain Sea Kayak Club c/o Janet Scervino P.O. Box 79 Silverthorne, CO 80498-0079.