



# GIFT MEMBERSHIP FORM

**For Office Use Only.**

Date received: \_\_\_\_\_

Member Owner #: \_\_\_\_\_

Notes: \_\_\_\_\_

**Gift Recipient Information**

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

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

**I certify the recipient of this gift membership is 21 years of age or older.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Gift Giver Information**

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

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

**Payment Method:**    ☐ Cash                      ☐ Check                      ☐ Credit Card**Who should we send the membership application and/or gift card to?**

- ☐ Send it to the gift recipient.
- ☐ Send it to the gift giver.

**NOTE:** Our preferred method of communication and delivery is email. Please let us know if you prefer U.S. Postage over email.**Comments:**